

Behavioral and Social Research Program

Research Career Awards

Award Mechanisms for Research Career Awards

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Grant: 5K01AG000943-04
Program Director: STAHL, SIDNEY M.
Principal Investigator: ALLEN-BURGE, REBECCA S PHD
Title: CARE INTEGRATION TEAM INTERVENTION DURING HOSPICE CARE
Institution: UNIVERSITY OF ALABAMA IN TUSCALOOSA TUSCALOOSA, AL
Project Period: 2000/04/15-2005/03/31

DESCRIPTION (adapted from the application): As a new investigator in the fourth year of her independent research career, the candidate has addressed this MRSDA application to the psychosocial geriatrics research objective of the NIA. The training phase of this application (Years 1-2) will provide supervised experiences and establish interdisciplinary collaborations in the following areas: (1) palliative care; (2) therapeutic interventions with terminal caregivers; (3) the assessment of medical decision making capacity and the legal issues involved therein; and (4) multivariate statistics for nested research designs. The purpose of the project in Years 3-5 is to develop and evaluate a two-pronged, Care Integration Team (CIT) intervention to improve communication among professional and personal caregivers for individuals receiving in-home hospice care. A two group comparison design with an embedded intrasubject comparison component will be used to test the intervention's effectiveness. The CIT intervention attempts to improve communication among the members of CIT by: (1) training registered nurses in the administration of advance care planning (ACP) interviews and the use of enhanced job structure to facilitate treatment fidelity, and (2) training personal caregivers in the use of problem solving skills. Aim 1 assesses the efficacy of training RNs to conduct ACP interviews and use enhanced job structure to track the impact of their ACP interviews on care recipient/personal caregiver dyads. Aim 2 measures the impact of RN-ACP interviewing on personal caregivers knowledge of advance directives and of care recipients medical treatment wishes. Personal caregivers satisfaction with the RN-ACP interview will also be assessed. Aim 3 assesses the efficacy of the two-pronged intervention on reducing personal caregivers experience of psychological and care-related distress during in-home hospice care. Secondary aims include measuring the longitudinal impact of the intervention among Caucasian and African-American dyads on changes in personal caregiver psychosocial outcome and on care recipient quality of life. Behavioral indicators of care recipient pain and communication will be assessed through videotapes and computer-assisted direct observational procedures.

Grant: 5K01AG020516-02
Program Director: STAHL, SIDNEY M.
Principal Investigator: DEGENHOLTZ, HOWARD B PHD
Title: The Quality of Life of Nursing Home Residents
Institution: UNIVERSITY OF PITTSBURGH AT PITTSBURGH PITTSBURGH, PA
Project Period: 2002/07/01-2007/06/30

DESCRIPTION (provided by applicant): Nursing homes are responsible for not only the quality of the medical and physical care of residents, but also for quality of life that residents are able to achieve. Residents, their families, regulators and providers are all vitally concerned that facilities provide environments that afford each resident the best opportunity for privacy, dignity, autonomy, social interaction and other aspects of a high quality of life. It is widely recognized, however, that the quality of life of nursing home residents often falls short of ideal. The physical environment is a major factor in the lives of nursing home residents. Despite the importance the environment in shaping the everyday lives of nursing home residents its effect on quality of life has not been studied systematically controlling for relevant variables such as resident case mix, staffing levels, and administrative policies that also influence quality of life. The proposed career development award will involve training activities designed to give the candidate a strong understanding of the clinical aspects of caring for nursing home residents, a deep understanding of the way physical environments are designed and used, and knowledge and skills for measuring costs associated with residential care for the elderly. The proposed research project will accomplish the following specific aims: 1. Determine the relationship between features of the nursing home environment and quality of life for different subgroups of residents. 2. Estimate the potential improvement in quality of life from modifying the environment. 3. Estimate the cost associated with environmental modifications. The proposed study will provide data on the impact on resident quality of life of the nursing home environment at the room, unit and facility level. By focusing on how different features of the physical environment promote or inhibit high quality of life for subgroups of residents, it will be possible to make concrete recommendations that can be used to guide quality improvement efforts.

Grant: 1K01AG021983-01
Program Director: STAHL, SIDNEY M.
Principal Investigator: GALLO, WILLIAM T PHD
Title: Health Effects of Involuntary Job Loss in Older Workers
Institution: YALE UNIVERSITY NEW HAVEN, CT
Project Period: 2003/06/01-2008/04/30

DESCRIPTION (provided by applicant): This application is a request for a Mentored Research Scientist Development Award in Aging (K01). The overall aim of the proposal is to provide the candidate, William T. Gallo, Ph.D., with a supervised training and research experience that will enable him to become an independent investigator focusing on the effect of involuntary job loss among workers nearing retirement on adverse health changes and mortality. Dr. Gallo, an economist whose multidisciplinary research encompasses the fields of economics, social epidemiology, and gerontology, is currently a faculty member in the Division of Health Policy and Administration at the Yale University School of Medicine. The K01 award, and the supportive research environment at Yale, will provide Dr. Gallo with the scientific tools necessary for successful career development. The specific objectives of the career development plan will be achieved by undertaking relevant didactic and substantive training. The didactic training will develop an understanding of the health dynamics of older individuals, explore the role of behavioral and psychosocial factors in health, elucidate the etiology and epidemiology of the health outcomes to be examined, and provide rigorous statistical training in the methods used to analyze longitudinal and survival data. The research will be explored within the framework of a well-established model of geriatric health, developed by Dr. Gallo's sponsor, Dr. Mary Tinetti, which posits declines in the health of older people as a multifactorial process, determined by both predisposition and precipitating, or situational, events, such as involuntary job loss. The proposed research will investigate the role of involuntary job loss as a precipitating event for adverse changes in physical functioning and depressive symptoms, and the onset of myocardial infarction and stroke among predisposed older workers; and will identify the subgroup(s) of older persons who are particularly vulnerable to these outcomes in the setting of job loss. Identifying vulnerable subgroups is a necessary step in designing targeted interventions to prevent declines in health following job loss. The research is based on data from five waves of the Health Retirement Survey (HRS), a NIA-funded, nationally representative sample of older adults in the United States. The estimated analytic sample for this research will include approximately 4,990 individuals, nearly 500 of which experience involuntary job loss.

Grant: 5K01AG020232-03
Program Director: STAHL, SIDNEY M.
Principal Investigator: JERVIS, LORI L PHD
Title: Native Elders, Dementia and Family Caregiving
Institution: UNIVERSITY OF COLORADO HLTH SCIENCES Aurora, CO
CTR
Project Period: 2001/09/30-2006/08/31

DESCRIPTION (provided by applicant): Very little is known about the impact of dementia on American Indians, despite dramatic increases over the past 50 years in this population's life expectancy. The goal of this Mentored Career Development Award (K01) is to provide the applicant with the skills and knowledge necessary to develop an independent program of research in the area of the evaluation and management of dementia among American Indians. As such, this proposal has three specific career development goals: 1) to better understand the cultural expression and management of dementia as it is experienced in Native communities, 2) to develop proficiency in the detection and assessment of dementia among Native elders, and 3) to cultivate expertise in the area of informal care giving for American Indians with dementia. The research project associated with this career development award constitutes a seminal effort to investigate dementia in a Native community. Specifically, the aims of this research are 1) to explore the cultural phenomenology of cognitive impairment within an American Indian community, 2) to test the acceptability and validity of a culturally modified dementia evaluation among Native elders, and 3) to examine family caregiving for persons with dementia, both its burdens and gratifications. To accomplish these aims, interviews will be conducted with 150 elderly clients of a senior nutrition program on a Northern Plains reservation. These interviews include a culturally modified dementia evaluation, as well as open-ended questions that explore the experience of aging, impairment, and being cared for in a reservation community. In addition, 30 family caregivers to elders representing a range of scores on the dementia evaluation will be interviewed about the challenges and gratifications of providing care to disabled elders. This research will yield valuable information about the cultural formulation, expression, and management of dementia in a Native community, knowledge that is crucial to efforts to determine dementia prevalence and to develop services for cognitively impaired Native elders and their family caregivers.

Grant: 5K01AG001051-03
Program Director: ELIAS, JEFFREY W.
Principal Investigator: LEVY, BECCA R PHD
Title: THE INFLUENCE OF AGING SELF-STEREOTYPES ON HEALTH
Institution: YALE UNIVERSITY NEW HAVEN, CT
Project Period: 2001/09/01-2006/08/31

DESCRIPTION (from application): This is a request for a MRSDA in Aging (MRSDAA) (K01). The overall aim of the application is to provide the candidate, Becca Levy, Ph.D., with a supervised research and educational experience that will enable her to become an independent investigator focusing on how psychosocial factors influence the long-term health of the elderly. Dr. Levy, an experimental social psychologist, became a faculty member at YU in 1999. A K01 Award, along with the supportive research environment at Yale, would provide Dr. Levy with the scientific tools for successful career development. The aims of the career development plan include developing a proficiency in: (1) psychosocial epidemiology of aging; (2) advanced statistics appropriate for analyzing longitudinal data sets; (3) research on disability in old age; and (4) issues involved in conducting and managing a longitudinal study. The overall objective of the two proposed studies is to determine whether aging self-stereotypes, beliefs about old people held by the elderly, influence patterns of functioning and survival. In Study 1, it is predicted that more positive aging self-stereotypes, as measured by the Attitude toward Aging subscale of the Philadelphia Geriatric Morale Scale (Lawton, 1975), will lead to lower rates of disability and mortality and higher rates of recovery among those that become disabled. This project will use the Ohio Longitudinal Study of Aging and Adaptation that includes six waves of data more than 21 years on 1106 participants, who were 50 years or older at baseline. In Study 2, it is predicted that more positive aging self-stereotypes, as measured at baseline by an open-ended question designed by the candidate, will protect individuals from experiencing an onset of dependence in activities of daily living (ADL) and will help those individuals, who develop ADL dependence to recover. Study 2 will draw on the Precipitating Events Project, an ongoing longitudinal study of 754 persons, 70 years or older, living in New Haven. This study will include three years of monthly telephone interviews about functioning. Together, these studies offer an excellent training opportunity and the possibility of identifying a new risk factor for disability and mortality that could be targeted by a psychosocial intervention.

Grant: 1K01AG020561-01A1
Program Director: STAHL, SIDNEY M.
Principal Investigator: LEVY-STORMS, LENE PHD
Title: Therapeutic communication during nursing home care
Institution: UNIVERSITY OF CALIFORNIA LOS ANGELES LOS ANGELES, CA
Project Period: 2003/07/01-2008/06/30

DESCRIPTION (provided by applicant): The purpose of this NIA Career Development Award (CDA) is to develop my substantive and methodological expertise in research on the therapeutic quality of communication between certified nursing aides (CNAs) and residents during activities of daily living (ADL) care (e.g., feeding assistance) in NHs. The proposed CDA will provide me with interdisciplinary training in the following three areas: 1) theory and measurement of therapeutic verbal and non-verbal communication, which will expand my health communication skills to clinical settings; 2) observational and experimental methods in long-term care settings (i.e., nursing homes), which will complement my experience with program evaluation in community settings; and 3) quality assessment in long-term care. This latter area will supplement my background in statistics and enable me to learn principles of measurement. Specifically, this CDA proposal will enable me to pursue my short-term career goal of developing measures of verbal and non-verbal communication between CNAs and residents in nursing homes during feeding assistance to identify problem behaviors and to assess if they can be improved. The observation and interview protocols will include: 1) an audio-video protocol for recording communication between CNAs and residents; 2) a resident interview protocol for assessing whether residents want changes in the way CNAs care for them during feeding assistance; and 3) a CNA interview protocol to assess barriers to therapeutic communication during feeding assistance. This CDA proposal incorporates a combination of formal coursework and tutorials with academic mentors and sponsors to provide me with the requisite theory and measurement skills to achieve my career goals. Dr. John Schnelle, a behavioral psychologist and expert in designing and implementing interventions in nursing homes, will serve as my primary sponsor and mentor. Four professors will serve as co-sponsors: Dr. Gwen van Servellen, a professor of nursing and expert in therapeutic communication; Dr. James Lubben, a professor of social work and expert in social support and the development of psychometric scales for older adults; Dr. Ronald Hays, a professor of medicine in health services research and expert in the measurement of patient satisfaction and health-related quality of life research; and Dr. John Heritage, a professor of sociology and expert in conversation analyses of physician-patient communication. As part of the candidate's long-term career goals, the candidate will develop communication interventions for CNAs during feeding assistance and other ADL care processes (e.g., dressing, getting in and out of bed) and evaluate them. Thus, the CDA training would be central to the applicant's ability to develop as an independent, behavioral scientist with a specialty in provider-patient communication among older adults in long-term care settings.

Grant: 5K01AG000994-03
Program Director: STAHL, SIDNEY M.
Principal Investigator: LOCHER, JULIE L PHD
Title: Eating Behaviors in Homebound Older Adults
Institution: UNIVERSITY OF ALABAMA AT BIRMINGHAM BIRMINGHAM, AL
Project Period: 2001/09/15-2006/08/31

DESCRIPTION (provided by applicant): The purpose of this Mentored Research Scientist Development Award (K01) is to provide the candidate, a newly graduated medical sociologist, with additional training and research experience that will enable her to pursue an academic career in aging with a focus on eating behaviors in homebound older adults. In order to fully understand and investigate the many factors that influence eating behaviors and health outcomes, and to design appropriate interventions to improve nutritional status in frail, homebound older adults, the candidate will need to acquire specialized knowledge and skills. She proposes a career development plan that consists of coursework, training, and research experiences with a mentoring/ consulting team of senior faculty and external mentors with expertise in the areas of nutrition, public health, and advanced statistics. The research program consists of a pilot study using a longitudinal design with consecutive waves of data collection. The first goal of the study is to examine the maintenance or modification of eating behaviors in older homebound adults who are experiencing an acute illness or chronic medical conditions, and factors associated with the maintenance or modification of those eating behaviors. The second goal of the study is to examine the direct and mediating effects of these eating behaviors on nutrition-related patient-based health outcomes. This research focuses on self-care eating behaviors adopted by frail older persons who are homebound because of acute or chronic health conditions, the stability and change of these behaviors over time, and the impact of these eating behaviors on health outcomes. This study will provide information that can be used to develop interventions and the preliminary data needed to design a larger-scale clinical intervention trial to test the effects of these interventions for improving the nutritional health of older homebound adults.

Grant: 5K01AG000977-04
Program Director: STAHL, SIDNEY M.
Principal Investigator: MITRANI, VICTORIA B PHD
Title: FAMILY RISK & PROTECTIVE FACTORS FOR DEMENTIA CAREGIVERS
Institution: UNIVERSITY OF MIAMI-MEDICAL Coral Gables, FL
Project Period: 2000/03/15-2005/01/31

DESCRIPTION (adapted from the application): The objective of this MRSDAA is for Dr. Victoria Mitrani, an Hispanic woman, to develop a career as an independent behavioral scientist in dementia caregiving research with aging families. This award would free Dr. Mitrani from most of her clinical and administrative duties and permit her to: (1) conduct a research study to develop a measurement model for family risk/protective factors for dementia caregivers, and test the usefulness of this model in predicting caregiver distress; and (2) develop the requisite skills to become an independent behavioral scientist. The proposed research capitalizes on a large-scale (N=216 families) longitudinal (four time points) data set collected as part of a family-based intervention trial to prevent and alleviate distress in European American and Cuban American dementia caregivers. Considerable clinical experience with the subject sample suggests that, family interactional functioning, including specific patterns of family interaction, e.g., developmental adjustment, caregiving leadership, and conflict management, place dementia caregivers at increased risk for or protect them from distress, e.g, burden, depression, and anxiety. A two stage study is proposed. Stage one develops a measurement model for family interactional functioning and examines its relationship to caregiver distress in a cross- section design. Stage two uses the longitudinal data to establish the malleability of family interactional functioning, and examine the relationship between changes in family interactional functioning and changes in caregiver distress. Findings from this study will shed light on potentially important, yet hitherto unstudied, family interactional risk/protective factors for caregiver distress. These findings will be used to generate theory-driven, culturally informed family interventions that are tailored for dementia caregivers, and will form the basis for an independent (RO1) application. The proposed career development plan includes a program of study organized around mentoring from senior scientists in the fields of aging and family intervention research, and formal courses. The UM s Center for Family Studies (CFS) and Center for Adult Development and Aging (CADA) provide an ideal setting for the proposed plan. The plan will allow the candidate to bridge the fields of family intervention science and dementia caregiving, two areas of research that have not been sufficiently integrated.

Grant: 5K01AG020980-02
Program Director: PATMIOS, GEORGEANNE
Principal Investigator: NOYES, EKATERINA I PHD
Title: Economic and Policy Analyses in Geriatric Disease
Institution: UNIVERSITY OF ROCHESTER ROCHESTER, NY
Project Period: 2002/09/01-2007/08/31

DESCRIPTION (provided by applicant): Dr. Noyes proposes to develop the skills necessary to become an independent researcher in the field of cost-effectiveness analysis and health policy evaluation in geriatric disease. The candidate's undergraduate training in biomedical physics and PhD training in neurophysiology confirm her commitment to research as well as her strong analytical capabilities. To strengthen her knowledge in health care policy, outcomes evaluation, statistical analysis, and data management, the candidate will complete the proposed didactic coursework and participate in a series of clinical skills workshops and seminars. The candidate will spend the main part of the five-year grant period conducting proposed research. The candidate's long-term plan is to improve efficiency of the health care system by incorporating cost-effectiveness analysis into health care policy and decision making, in particular, related to Parkinson's disease (PD) and geriatric depression. The study will address short-comings of the methods currently used to evaluate outcomes in PD and will use patient's quality of life as the effectiveness measure. It is hypothesized that 1) levodopa is more cost-effective than pramipexole in the treatment of early PD; 2) elderly chronically ill patients use more health services than do general Medicare beneficiaries; and 3) disability and long-term care are the main sources of expenses associated with chronic geriatric disease. The project's specific aims are to conduct a cost-effectiveness analysis of early PD therapy with pramipexole compared to levodopa, to assess the pattern of health care utilization in Medicare beneficiaries with PD, and to develop a Parkinson's disease health policy pilot model. The cost-effectiveness will be assessed based on 4 years of data collected from a clinical-economic trial in PD. The patterns of health services utilization of Medicare patients will be examined using the Medicare Current Beneficiary Survey. Supplemental data on costs will be collected from published literature and Medicare fee schedules. The study design will include cost-effectiveness analysis, decision analytical modeling, sensitivity analysis, and Bayesian statistics. The results of this study can serve as a foundation for developing clinical guidelines for PD, provide information for resource allocation with respect to long term institutional and informal care, and to improve public health policy associated with chronic diseases and aging. Supervision for this project will be provided by a multidisciplinary team at the University of Rochester whose members are experienced in fostering the development of clinical researchers. The model and analytical approaches acquired by the candidate during her training will be used later to develop a decision analytical model describing geriatric depression.

Grant: 5K01AG019194-03
Program Director: CHON-LEE, ANGIE J
Principal Investigator: ROMEIS, JAMES C
Title: High-risk health behaviors, health services use & aging
Institution: ST. LOUIS UNIVERSITY ST. LOUIS, MO
Project Period: 2001/09/30-2004/08/31

DESCRIPTION (provided by applicant): This MRSDA K01 requests 3 years support for advanced research training in genetic gerontology and research support to study genetic and environmental influences on psychosocial geriatrics, health behavior, health services use, and aging. The long-term overall goal of the proposed study is to establish the Vietnam Era Twin [VET] Registry's promise for longitudinal health behavior and aging research. The intermediate goal is to conduct a study that points to research directions for health behavior and aging using the VET Registry. Aims 1 and 2 use data from the Swedish Adoption and Twin Survey and Aging (SATSA) and VET studies to evaluate genetic and environmental influences on stability versus change in (a) self-reported health, (b) health services utilization in Sweden and (c) high-risk health behaviors (obesity, smoking, low physical activity, excess alcohol consumption) in aging male and female like-sex twin pairs. Effects of cohort, gender, and medical condition will be controlled. Aim 3 evaluates the influence of psychiatric Hx and history of substance abuse on self-reported health and high-risk health behaviors among VETs. Aim 4 uses prospective data on obesity, smoking and alcohol use to evaluate genetic and environmental influences on persistence and change in health behaviors and the extent to which these are mediated through psychiatric risk factors. Both Registries have four assessments spanning periods 1984-1996 [total N ~ 3,100 like-sex twin pairs] aged 40-80+ [SATSA] and 40-55 [VET]. For Aims 1-2, bi-variate and developmental genetic modeling will evaluate stability and change in self-reported health, health services use and high-risk health behaviors, controlling for gender, cohort and medical conditions. Replicability of SATSA modeling for VETs will be assessed. Aims 3-4, use developmental genetic modeling and include nine year risk factor Hx and psychiatric Hx to evaluate genetic and environmental influences on persistence and change in high-risk health behaviors, mediated through psychiatric risk factors. The training is designed to provide analytical skills in genetic gerontology to be competitive as an independent investigator. The research project will add significantly to the literature on the role of genetics in understanding persistence of high-risk behaviors in the context of aging.

Grant: 5K01AG001026-03
Program Director: STAHL, SIDNEY M.
Principal Investigator: SIMMONS, SANDRA F PHD
Title: Staffing Costs and Behavioral Nutritional Interventions
Institution: UNIVERSITY OF CALIFORNIA LOS ANGELES LOS ANGELES, CA
Project Period: 2001/09/01-2006/08/31

DESCRIPTION (provided by applicant): The purpose of this NIA Career Development Award (CDA) application is to provide the investigator with the knowledge, analytical skills, and preliminary database to delineate the nursing home (NH) staff resources necessary to implement behavioral and environmental interventions to improve nutritional intake in NH residents. The proposed CDA will allow the investigator to receive training in three primary areas, each of which compliments her existing knowledge: (1) undernutrition in older adults, which will compliment her existing expertise in the health and associated quality-of-life issues facing the NH population; (2) cost analysis, and (3) operations-research modeling, both of which compliment her existing knowledge in research methodology and statistical analysis. This CDA application is designed to provide the investigator with the necessary knowledge and analytical skills to pursue her immediate career goal of refining and validating three methodological tools related to the development of behavioral and environmental interventions to improve nutritional status among NH residents: (1) a mealtime preference-satisfaction interview; (2) a nutritional assessment instrument to identify behavioral and environmental determinants of food intake; and (3) an evaluation tool to examine residents responsiveness to a behavioral and environmental intervention to improve intake and to assess the staff time required to implement the evaluation. The proposed CDA program of training incorporates formal coursework and individualized tutorials to provide the investigator with the requisite knowledge and skills to accomplish her immediate career goals. Dr. David Reuben, a geriatrician and expert in nutritional issues among older adults, will serve as the investigator's sponsor and primary mentor. [Dr. Gail Harrison, a nutritionist and expert in nutritional assessment issues, will serve as a mentor in the development of the nutritional assessment tools.] [Dr. John Schnelle, a behavioral psychologist and expert in applied research, will serve as her mentor for the development, implementation, and evaluation of behavioral and environmental interventions in the NH setting. [Dr. Shan Cretin, a senior operations-research scientist at RAND,] will be her mentor in operations-research modeling, which will be used to project the NH staff resources necessary to implement the interventions; while, Dr. Emmett Keeler, a senior statistician at RAND, will provide training in cost analysis related to the interventions and the necessary staff resources. Such training will permit the investigator to pursue her long-term career goal of developing behavioral and environmental interventions to improve quality of life among the institutionalized elderly and determine the NH staff resources and the associated costs necessary to implement such interventions in the NH setting. Thus, the proposed CDA training would be central to the investigator's ability to develop as an independent scientist within her chosen area of gerontological research.

Grant: 1K01AG022072-01
Program Director: STAHL, SIDNEY M.
Principal Investigator: SORENSEN, SILVIA PHD
Title: Preparation for Future Care in Older Adults
Institution: UNIVERSITY OF ROCHESTER ROCHESTER, NY
Project Period: 2003/07/01-2008/06/30

DESCRIPTION (provided by applicant): This K01 Award will allow the candidate to deepen and expand her research on Preparation for Future Care (PFC) in older adults. PFC is defined as thoughts and actions involved when individuals formulate explicit plans for where, when, how, and from whom they will receive care if they become frail. More than 50% of older adults have no concrete plans for care, and 20% actively avoid any planning. For many, crisis care decisions lead to inappropriate care arrangements, including health care over-or-under-utilization, and premature death. Given the aging of the population, failure or inability to prepare for future care presents a problem for public policy and public health. The proposed program of research will lay the foundation for designing and implementing studies that will inform clinical and policy-based interventions to enhance PFC in the older population. The research plan is designed to initiate a program of systematic research on PFC by (1) describing the natural course of PFC in older adults at greater than average risk for care needs, (2) investigating four antecedents of PFS: Personality, Cognitive Functioning and Impairment, Depression, and Medical Illness, (3) examining the consequences of PFC over time with regard to Subjective Well-being, Functional Status, and Health Care Utilization. Data will be collected as part of an ancillary study to a NIA-funded longitudinal investigation of first-degree relatives of Alzheimer's patients (ADAPT). In addition, secondary data analyses will be performed in an ongoing NIH-funded study of depression in primary care patients (DOS), and HCFA's Medicare Current Beneficiaries data, in order to assess the antecedents and consequences of PFC. The educational plan includes (1) Tutorials and consultation to increase the candidate's knowledge of Personality, Cognitive Functioning and impairment, Depression, Medical Illness and Functional Status, (2) academic coursework and mentored research experiences to develop her skills in assessment and analysis of health care utilization, (3) coursework and research experiences to teach her advanced statistical methods for longitudinal analysis. The Candidate will combine perspectives from life-span development, epidemiology, health services, and late life psychopathology to develop PFC as a vibrant, multidisciplinary field of scientific inquiry with the potential to influence public health and public policy.

Grant: 5K02AG000979-05
Program Director: SHRESTHA, LAURA B.
Principal Investigator: CARNES, BRUCE A BA
Title: BIODEMOGRAPHY OF GENETIC DISEASE
Institution: NATIONAL OPINION RESEARCH CENTER CHICAGO, IL
Project Period: 1999/05/01-2003/08/31

This Independent Scientist Award derives from an ongoing effort to investigate age patterns of mortality in populations from a biological perspective. Evolution theory predicts natural selection's ability to influence gene expression begins a decline at the age of sexual maturity that reaches negligible levels by the ages when reproduction ceases. This age gradient for selection permits the life span to be partitioned into biologically meaningful age ranges—a pre-reproductive period, a reproductive period, and a post-reproductive period. Biodemographic research influenced by evolution theory has led to a mortality classification that distinguishes between genetic and non-genetic causes of death and has generated predictions and testable hypotheses about the age distribution of deaths with a genetic etiology. Emerging research on the molecular etiology and pathogenesis of disease suggests that genetic diseases can be further partitioned into those that are heritable and those thought to arise from the accumulation of acquired genetic damage. This award is designed to permit the PI to permanently leave his position as a radiation biologist, move into research and teaching in the field of aging full-time, receive training in subjects relevant to biodemographic research, and pursue a series of research projects associated with the training that initially focus on the biodemography of genetic diseases in humans. The results derived from this award will have relevance for the estimation of lower limits to age-specific death rates, upper limits to human longevity, and forecasting life expectancy and the size of the older population.

Grant: 7K02AG000979-06
Program Director: SHRESTHA, LAURA B.
Principal Investigator: CARNES, BRUCE A BA
Title: BIODEMOGRAPHY OF GENETIC DISEASE
Institution: UNIVERSITY OF OKLAHOMA HLTH SCIENCES OKLAHOMA CITY, OK
CTR
Project Period: 1999/05/01-2004/04/30

This Independent Scientist Award derives from an ongoing effort to investigate age patterns of mortality in populations from a biological perspective. Evolution theory predicts natural selection's ability to influence gene expression begins a decline at the age of sexual maturity that reaches negligible levels by the ages when reproduction ceases. This age gradient for selection permits the life span to be partitioned into biologically meaningful age ranges—a pre-reproductive period, a reproductive period, and a post-reproductive period. Biodemographic research influenced by evolution theory has led to a mortality classification that distinguishes between genetic and non-genetic causes of death and has generated predictions and testable hypotheses about the age distribution of deaths with a genetic etiology. Emerging research on the molecular etiology and pathogenesis of disease suggests that genetic diseases can be further partitioned into those that are heritable and those thought to arise from the accumulation of acquired genetic damage. This award is designed to permit the PI to permanently leave his position as a radiation biologist, move into research and teaching in the field of aging full-time, receive training in subjects relevant to biodemographic research, and pursue a series of research projects associated with the training that initially focus on the biodemography of genetic diseases in humans. The results derived from this award will have relevance for the estimation of lower limits to age-specific death rates, upper limits to human longevity, and forecasting life expectancy and the size of the older population.

Grant: 5K02AG020113-02
Program Director: STAHL, SIDNEY M.
Principal Investigator: FRIED, TERRI R. BA
Title: Treatment goals at the end of life
Institution: YALE UNIVERSITY NEW HAVEN, CT
Project Period: 2002/02/15-2007/01/31

DESCRIPTION (provided by applicant): A geriatrician with both quantitative and qualitative research skills, Dr. Fried is poised to consolidate her career as an independent investigator. The K02, described as a time-off clinical duties award, would permit her to avoid the additional clinical responsibilities she would otherwise be expected to assume as her early career development awards end. Her research program is focused on the elicitation of older persons preferences for different intensities and sites of in care and on the outcomes of these alternative care strategies. It began with projects examining attitudes toward life-sustaining treatment and advance directives, and outcomes of pneumonia in nursing home residents treated with and without hospital transfer. Additional studies have examined the use of and older persons attitudes toward home as a treatment site in acute and terminal illness. Recent work has focused on older persons treatment preferences in serious and terminal illness. Results of this work include reliable and valid new patient-centered measures of treatment preference and the development of a unique cohort of seriously ill older outpatients. Building upon this earlier work, the overall objective of the proposed study is to examine changes in the preferences of both patients and their families across a spectrum of diseases. The primary aim is to determine the effect of primary diagnosis, health status, and healthcare utilization on the preferences of patients and their families. The study will involve 226 terminally ill older persons and a family member. They will be interviewed in their homes every four months if medically stable, and as frequently as every month if the illness is progressing. The relationship of disease diagnosis, health status (functional status, symptoms, self-rated health), healthcare utilization, and understanding of the illness prognosis to preferences will be examined using longitudinal repeated measures analysis. Dr. Fried s research program also consists of additional cohort studies examining communication, symptoms, and function in this study group and intervention studies to enhance physician-patient communication. With colleagues skilled in patient-centered research, extensive data management and analysis support, and senior faculty and administration committed to Dr. Fried s continued success, Yale offers the resources necessary to ensure Dr. Fried s continued development as an independent investigator.

Grant: 5K02AG000976-03
Program Director: SHRESTHA, LAURA B.
Principal Investigator: GAVRILOV, LEONID A MS
Title: THE BIODEMOGRAPHY OF HUMAN LONGEVITY--A TRAINING PROGRAM
Institution: NATIONAL OPINION RESEARCH CENTER CHICAGO, IL
Project Period: 2001/04/15-2006/03/31

DESCRIPTION (applicant s abstract): The aim of this application is to permit the investigator with an opportunity to develop his career as an independent scientist in the biodemography of longevity. He has changed both his research approach (from studies of aggregated demographic life tables to the analysis of individual familial longevity records) and country of residence (immigrated to the United States from Russia). The investigator will undertake five years of training, study, research and career development to acquire enhanced research analytical skills in familial data analysis (event history analysis, multivariate survival analysis, multilevel modeling, population genetics), to strengthen his biosocial background and broaden his collaborative network with other U.S. investigators. His host organization, the Center on Aging at NORC/University of Chicago (UC), provides the investigator with an excellent working environment and strongly supports this application. In the proposed research, the investigator will fill a major gap in knowledge regarding long-term, postponed effects of delayed parenting on the life expectancy of adult offspring (life-shortening effects, expected from biological theories of aging). The specific aims of the proposed study are: (1) to determine whether persons born to older fathers have a shorter lifespan (expected as a result of the age-related accumulation of spontaneous mutations in paternal germ cells); to test his preliminary finding that only daughters born to older fathers have shorter lifespans (consistent with the critical importance of mutation load on the paternal X chromosome inherited by daughters only); (2) to analyze the maternal age effects on offspring longevity (in relation to the possible role of age-related accumulation of oxidative damage to mitochondrial DNA in maternal ova cells); (3) to examine the prediction of the X chromosome hypothesis that there should be a specific effect of late grandparental reproduction of maternal grandfathers only on grandsons'longevity; (4) to check the prediction of the parental support hypothesis that for longer lived parents the parental age effects will be less expressed. This research plan allows the investigator to acquire enhanced practical skills and research experience in advanced methods of multivariate statistics, data quality control and database management. The award allows the investigator not only to complete the proposed training and research projects, but also to develop a full-scale long-term research program in the biodemography of human longevity.

Grant: 1K02AG019736-01A2
Program Director: PATMIOS, GEORGEANNE
Principal Investigator: OTTENBACHER, KENNETH J PHD
Title: Independent Scientist Award
Institution: UNIVERSITY OF TEXAS MEDICAL BR GALVESTON, TX
GALVESTON
Project Period: 2003/05/01-2008/04/30

DESCRIPTION (provided by applicant): The candidate (Kenneth J. Ottenbacher) holds a faculty position at the University of Texas Medical Branch (UTMB) in Galveston, Texas, that involves several administrative roles including: Vice Dean in the School of Allied Health Sciences, Director of the Division of Rehabilitation Sciences, and Associate Director of the Sealy Center on Aging. The K02-Award will allow Dr. Ottenbacher to reduce his administrative responsibilities and focus additional time on research. K02 funding will permit him to expand his examination of the disablement process in older adults. His current research is funded by grants from the National Institute on Aging and, more recently, the American Heart Association. Specifically, Dr. Ottenbacher will systematically explore the relationship between functional status and two components of the disablement process associated with quality of life - patient satisfaction and participation in community and social/personal activities (as defined in the World Health Organization's, International Classification of Functioning, Disability and Health). The immediate goals for the K02 include: 1) reduce administrative responsibilities to a less than 25% time commitment, 2) increase publication rate by 20% per year for the next four years, and 3) increase amount of externally funded grant dollars by 100% by end of K02-award. These goals will be accomplished by permanent resignation of his administrative role as Vice Dean in the School of Allied Health Sciences and reassignment of other responsibilities, including transferring management of a Health Services Resources Administration training grant, for which he is currently PI, to another faculty member. These changes will allow Dr. Ottenbacher to devote a minimum of 75% time to research and achieve his long term goals of establishing a program of externally funded research supported by multiple R01 type grants that contributes to the understanding of older adults with disabilities.

Grant: 5K02AG000970-02
Program Director: STAHL, SIDNEY M.
Principal Investigator: ZIMMERMAN, SHERYL I PHD
Title: Quality Assisted Living For The Elderly
Institution: UNIVERSITY OF NORTH CAROLINA CHAPEL CHAPEL HILL, NC
HILL
Project Period: 2002/03/15-2007/02/28

DESCRIPTION (provided by applicant): Nearly three million older persons are housed in long-term care (LTC) settings. Until recently, most resided in nursing homes (NHs), but residential care/assisted living (RC/AL) facilities have been proliferating as alternatives to NH care. RC/AL facilities are extremely varied, ranging from small board and care homes to large complexes. The residents they serve also are diverse, and many resemble persons in NHs, including elderly with Alzheimer's Disease and related dementias. Despite the prevalence of RC/AL, research data in this area are sparse. The principal investigator has conducted statewide studies of NH care, and is currently conducting the largest study of the structure and process of care across RC/AL facilities, with the aim of identifying facility characteristics that relate to resident outcomes. Her involvement in these projects focusing on the quality of life and quality of care in NHs and RC/AL settings position her to undertake the aims of the proposed project. The focus of the proposed research is on three areas that are especially relevant in this evolving field: (1) the relationship between RC/AL quality of care and regulation; (2) health care utilization and cost in RC/AL compared to NHs; and (3) the implementation and evaluation of LTC policy using an outcomes-based perspective. This independent scientist application outlines three sets of activities to enhance the candidate's ability to make scholarly contributions to the field of RC/AL: working with national policy and RC/AL experts to compare facility characteristics that relate to outcomes to those addressed in existing regulations, culminating in manuscripts and the development of a demonstration project; working with health policy and LTC experts and receiving additional training toward the development of manuscripts and an application to use Medicare data to better understand issues of utilization and cost across RC/AL and NHs; and working with state regulators and health services research and policy experts to develop measures and protocols to monitor the implementation and outcomes of new LTC policies. Overall, the principal investigator's ultimate objective is to improve the quality of LTC for our nation's elderly.

Grant: 5K07AG001015-04
Program Director: SHRESTHA, LAURA B.
Principal Investigator: BLAU, DAVID M MA
Title: DEMOGRAPHY AND ECONOMICS OF AGING AND THE LIFE COURSE
Institution: UNIVERSITY OF NORTH CAROLINA CHAPEL CHAPEL HILL, NC
HILL
Project Period: 2000/09/30-2005/08/31

DESCRIPTION (adapted from the application): The goal of this K07 application is to promote research and research training on the demography and economics of aging at the UNC-CH. Support is requested for a program led by Dr. David Blau, a labor and population economist and professor of economics, and Dr. Edward Norton, a health economist and associate professor of health policy and administration, and administered through the Carolina Population Center (CPC). Specific activities to be pursued by the Demography and Economics of Aging Research (DEAR) program under K07 support are: (1) seed funding for pilot studies on issues in the demography and economics of aging intended to lead to grant applications submitted for external funding; (2) a seminar series on demography, and economics of aging research; and (3) travel awards to researchers to present findings at professional aging and gerontology meetings. External support for population aging studies will be combined with internal support to build a base of scientific interest and research and training capacity at UNC-CH. The CPC mission is to coordinate population research and research training at UNC-CH. Demographic and economics research on aging will be further enhanced by formal collaboration with the new state-legislated Institute on Aging (IOA), sited on the UNC-CH campus, that has a statewide mandate to promote gerontological research, translate research-based knowledge into educational and practice programs, and inform state policies and programs that address the needs of older adults and their families. The present offers an opportune time to promote demography and aging research at UNC-CH across departments, centers and institutes with a permanent IOA director in place and broad institutional support for research collaboration. K07 support will enable the formation of a visible scientific community of UNC-CH faculty committed to building a strong research program on population aging, an area to which there has been an increasing and recent university commitment of resources.

Grant: 5K07AG001055-03
Program Director: SHRESTHA, LAURA B.
Principal Investigator: FERRARO, KENNETH F. MA
Title: INTERDISCIPLINARY RESEARCH ON LIFE COURSE INEQUALITY
Institution: PURDUE UNIVERSITY WEST LAFAYETTE WEST LAFAYETTE, IN
Project Period: 2001/03/01-2006/02/28

DESCRIPTION (from application): The overall aim of this project is to strengthen PU research and training on aging and life course inequality. While the University has a long history of research and instruction in gerontology, it has only recently developed an institutional structure to support interdisciplinary inquiry on aging for faculty and graduate students. This project is designed to build upon the recent institutional development by focusing research on life course analysis, especially inequality and cumulative disadvantage across the life course. This application is designed to enhance social and behavioral expertise on aging along two developmental loci. The first is to provide research development opportunities for faculty in the social and behavioral sciences. The second focus is graduate education. The project seeks to strengthen interdisciplinary initiatives in gerontology related to the professional and methodological training of graduate students. Specific aims of this project include: (1) To stimulate research on life course inequality by PU faculty and graduate students; (2) to enhance graduate education in social gerontology by further integrating theories and methods for the study of the life course; (3) to provide opportunities for faculty to participate in an interdisciplinary research program on life course inequality; and (4) to contribute to the scientific understanding of the antecedents and consequences of inequality across the life course. Specific mechanisms to achieve the research and training initiatives include the: formation of research clusters, pilot grant program, scientific advisory board review, symposium series, participation in summer intensive courses, minority student recruitment, and interdisciplinary educational opportunities for graduate students. The success of the program will be measured by multiple performance indicators such as refereed journal articles, extramural research funding, curriculum development, interdisciplinary doctoral committees, and placement of graduate students.

Grant: 5K07AG000998-04
Program Director: STAHL, SIDNEY M.
Principal Investigator: GITLIN, LAURA N MA
Title: RESEARCH PROGRAM TO PROMOTE OPTIMAL AGING IN PLACE
Institution: THOMAS JEFFERSON UNIVERSITY PHILADELPHIA, PA
Project Period: 2000/05/01-2005/04/30

This is an application for a Geriatric Academic Career Leadership award (K07) submitted to the National Institute on Aging. The applicant, Dr. Laura N. Gitlin, seeks funding to advance the research and training capacity in aging of the newly formed Senior Health Institute of Thomas Jefferson University (TJU) and the Jefferson Health System (JHS). The Senior Health Institute (SHI) represents the integration of an academic institution with a large health system in the Philadelphia region. It involves individuals from TJU and JHS with a long-standing commitment to geriatrics and gerontology and strong track records for funded research. However, an infrastructure to coordinate and advance aging research and education activities across departments and institutions is lacking. With this award Dr. Gitlin seeks to enhance and integrate the capacity of the SHI for multidisciplinary social, behavioral, clinical and biological research; advance a program of research on community and home-based interventions; and expand and integrate academic training in aging for medical, nursing, occupational therapy, and physical therapy students, and geriatric fellows. A central focus of the proposed research program is on independent living and includes topics related to functional performance and its measurement, physical and psychological consequences of age-related illness and disability, and innovative health and human service interventions for successful aging in place among diverse populations. To achieve these goals, five specific aims will be pursued: 1) build an infrastructure that links TJU and JHS researchers in aging and establishes system-wide mechanisms to support research; 2) implement a "research to practice" program that guides formation of research questions relevant to intervention research on independent living, 3) expand the capacity to conduct intervention research on community and home care issues; 4) expand undergraduate and graduate education for health professional students to include certificate training; and 5) integrated and enhance training of geriatric fellows in intervention research. To accomplish these objectives, a set of integrated activities is planned that includes developing a web page and newsletter; forming multidisciplinary research teams on topics related to independent living; conducting a needs assessment of research and outcome needs of community-based service programs; developing guidelines for accessing community populations; providing pilot research and mentorship experiences; conducting continuing education and faculty development workshops; and developing a seminar series on intervention methodology. It is anticipated that at the conclusion of the grant program the SHI will have an active research program that is multidisciplinary, nationally recognized, and addresses critical issues in independent living.

Grant: 5K07AG000830-05
Program Director: STAHL, SIDNEY M.
Principal Investigator: JOHNSON, JERRY C MD
Title: UNIVERSITY OF PENNSYLVANIA LONG TERM CARE NETWORK
Institution: UNIVERSITY OF PENNSYLVANIA PHILADELPHIA, PA
Project Period: 1998/04/01-2004/03/31

The leadership award is designed to improve an institution's curricula and enhance the research capacity in Geriatrics. Accordingly, this proposal describes the creation of a network of academic long-term care institutions, joined with the University of Pennsylvania's IOA to collectively enhance their research and education capacity. We will engage experienced researchers within the University to bolster the interdisciplinary collaborations and promote age-related research in multiple long-term care settings. In this proposal, "long-term care setting" refers to any setting whereby a spectrum of services may be provided to persons with illnesses that affect their ability to care for themselves, including the home, adult day care, partial hospital programs, assisted living, personal care settings, nursing homes or life care communities. Moreover this project will incorporate all such settings, with nursing homes making up the largest numbers. In creating this ALTCN, we will 1) develop an infrastructure to facilitate age- related research in long-term care settings; 2) provide an environment to foster an interest in age-related research among young investigators and students; 3) expand available data sets for long-term care research; 4) develop mechanisms to resolve obstacles to long-term care research; 5) promote new age-related research among the researchers of the IOA and 6) disseminate long-term care research.

Grant: 5K07AG000892-05
Program Director: SHRESTHA, LAURA B.
Principal Investigator: LAND, KENNETH C PHD
Title: ACADEMIC CAREER LEADERSHIP AWARD
Institution: DUKE UNIVERSITY DURHAM, NC
Project Period: 1999/09/30-2004/08/31

Duke University requests funds for an Academic Career Leadership Award to Dr. Kenneth C. Land to further interdisciplinary research into the social demography, medical demography, biodemography, and economics/actuarial science of aging. Land's scientific contributions to demography, statistics, and sociology are widely recognized. His leadership skills have been tested and proven during three full terms as Chairman of the Sociology Department at Duke. He is a Senior Research Fellow in the Center for Demographic Studies and has had a long association with the current NIA-funded training program in the social and medical demography of aging which he now directs. The proposed project would build on the substantial portfolio of research projects underway on the medical demography, social demography, and actuarial science of aging at the Center, as well as on the large array of additional research on aging at Duke. This project would allow Professor Land to develop the institutional and network connections of the Center with a number of other programs at Duke and neighboring institutions; to improve the curriculum in the demography of aging for our training program as well as in related areas across a number of departments and schools; and to enhance the research capacity at Duke through increased interaction among researchers and through the provision of research support services, especially programming assistance to facilitate the use of several new, complex, and longitudinal datasets.

Grant: 5K07AG000921-05
Program Director: STAHL, SIDNEY M.
Principal Investigator: MAGAI, CAROL L PHD
Title: CAREER LEADERSHIP AWARD IN ETHNOGERONTOLOGY
Institution: LONG ISLAND UNIVERSITY BROOKLYN BROOKVILLE, NY
CAMPUS
Project Period: 1999/09/30-2004/08/31

Goals: The three overarching objectives of this NIA Academic Career Leadership Award, are to 1) expand the candidate's background in health and aging research, 2) develop a strong research base in ethnogerontology at Long Island University and SUNY Health Science Center, Brooklyn (SUNY HSCB), and 3) establish a vigorous research training environment for ethnogerontology. **Candidate and Environment:** The PI, who has a background in physiological psychology and lifespan developmental psychology is Professor of Psychology and Director of the Center for Studies of Ethnicity and Human Development at the Brooklyn campus of Long Island University. Her immediate goal is to strengthen her own background in health and aging research and that of several core colleagues, and her long-term goal is to make the Brooklyn campus of LIU a leading center for graduate and postgraduate study in ethnogerontology. The Brooklyn campus, which is a minority institution with over 55 percent underrepresented minority students, is located in one of the most ethnically diverse communities in the United States. SUNY Health Science Center is the largest medical school in New York State, offers complementary strengths, and is also centrally located in Brooklyn. **Research Program:** This 5-year, interdisciplinary and dual-campus program contains the following more specific aims. Over the course of the training grant we expect to a) promote the development of collaborative research initiatives among a set of core interdisciplinary faculty at LIU and SUNY HSCB, b) develop at least two dual-site, multidisciplinary proposals for federal funding, c) mentor 4-6 especially promising junior faculty to conduct pilot studies and submit grant applications, d) to prepare 8 minority Master's level students to enter doctoral programs in aging, and e) provide at least 60 health care workers in the Brooklyn community with education in state-of-the art health care delivery in a multi-ethnic context. Two waves of junior faculty and Masters students from LIU and SUNY HSCB will be recruited for research preceptorships. A core group of senior research faculty will serve as mentors. The area of research to be cultivated in this program revolves around social and behavioral aspects of aging related to health and health behaviors, in particular, emotion regulation and social networks.

Grant: 5K07AG000923-05
Program Director: STAHL, SIDNEY M.
Principal Investigator: SCHULZ, RICHARD PHD PSYCH ASPECT:SOC
PSYCH/ASPECTS-UNSPEC
Title: PITTSBURGH NIA ACADEMIC CAREER LEADERSHIP AWARD
Institution: UNIVERSITY OF PITTSBURGH AT PITTSBURGH PITTSBURGH, PA
Project Period: 1999/07/01-2004/06/30

This is an Academic Career Leadership Award application (K07) submitted to the National Institute on Aging (NIA). The applicant, Dr. Richard Schulz, and the supporting institution, the University of Pittsburgh, have not been prior recipients of an NIA Leadership award. The University of Pittsburgh has an established track record of funding in research on aging. Thus, the goals of this application are to integrate and enhance existing programs of aging research and training and to develop two substantially new research areas. Six specific aims will be pursued which will increase the research potential and academic capacity for the study of aging within the University. The two new research areas to be developed are to (a) establish an outcomes research and clinical services research bridge program that will provide guidance for the development and evaluation of the University of Pittsburgh Medical Center Health System (UPMC-HS) geriatric clinical services programs and enable academic health researchers to carry out state-of-the-art geriatric health services research, and (b) build our capacity to carry out social, behavioral, and clinical services intervention research. Program enhancement goals include (a) the coordination of multidisciplinary research that cuts across departmental and school boundaries, (b) establishing a centralized capacity for subject recruitment and tracking and a centralized center for managing and archiving major longitudinal data bases generated by research programs at the University, (c) integrating pre- and post-doctoral aging research training programs, and (d) developing a comprehensive centralized plan for the future of undergraduate and graduate training. Implementing these aims will require the participation of and support from faculty and administrators from the University as well as the UPMC-HS. Methods to be followed, key faculty and administrators who will participate in this process, and specific outcomes associated with each of these aims are described in subsequent sections of this application.

Grant: 1K07AG021587-01A1
Program Director: STAHL, SIDNEY M.
Principal Investigator: SLOANE, PHILIP D
Title: Preparing the Next Generation of Researchers in Aging
Institution: UNIVERSITY OF NORTH CAROLINA CHAPEL HILL, NC
HILL
Project Period: 2003/09/30-2008/08/31

DESCRIPTION (provided by applicant): Aspiring research scientists frequently fail to develop successful careers due to a lack of focus, insufficient mentoring, and inadequate opportunities for collaboration. The early faculty years are an especially vulnerable period, during which time they could benefit from the guidance of senior faculty, individually-tailored formal instruction, participation in established research programs, critique of works-in-progress, and opportunities for professional networking. The goal of this academic leadership career award (K07) is twofold: (1) to promote the successful development of junior faculty researchers in the health sciences disciplines whose work will shed new light on pressing issues related to the provision of health services to older persons with chronic illness and disability in community and long-term care settings, and, in doing so, (2) to enhance the capacity of the University of North Carolina at Chapel Hill (UNC-CH) to make significant research contributions in these areas. The proposed project will be housed in the Program on Aging, Disability and Long-Term Care of the Cecil G. Sheps Center for Health Services Research - the largest aging research program on campus, which conducts a range of interdisciplinary research and has a strong track record of mentoring. The project will be directed by Philip Sloane, MD, MPH, the program's co-director, who will devote one-quarter time to this effort. Sheryl Zimmerman, PhD, the program's other co-director, will donate ten percent time in areas relevant to her K02 on long-term care. Other program faculty and staff who will assist in this effort include a biostatistician, analyst, project manager, and research assistant. The project steering committee will include directors of aging-oriented programs, centers and institutes on campus. The proposed project will consist of an intensive mentoring and research career development program for four junior faculties per year (Faculty Fellows). Participants will be drawn from the disciplines of medicine, nursing, pharmacy, social work, allied health, dentistry, and public health. Each participant's sponsoring unit will guarantee a minimum of 40 % dedicated research time. Participants will engage in a structured program consisting of: a) career mentoring; b) intensive research mentoring; c) availability of subject cohorts for use in pilot and preliminary studies; d) a monthly seminar series on critical methodological and funding issues in aging; e) biweekly discussions of works-in-progress; f) required research presentations and proposals; and g) a \$4,000 annual allowance for networking, professional travel, and research development. Candidate selection will assign priority to traditionally underrepresented minorities, women, and physician-scientists. Fellows will transition out of the program upon obtaining significant independent funding through a research career award, R01, or major foundation research grant. Project success on both individual and programmatic levels will be measured by academic accomplishments of current and former Faculty Fellows. Institutional mechanisms are in place to provide ongoing support for this model of mentoring, if successful, and they will be pursued as a partnership between the Candidate, the Sheps Center, and the University's Vice Chancellor for Research and Graduate Studies.

Grant: 5K07AG019165-02
Program Director: PATMIOS, GEORGEANNE
Principal Investigator: WEINSTEIN, MAXINE A BS
Title: Infrastructure for Aging & Health Research
Institution: GEORGETOWN UNIVERSITY WASHINGTON, DC
Project Period: 2002/02/15-2007/01/31

DESCRIPTION (provided by applicant): Georgetown University is home to a diverse set of researchers who teach and do research in the field of aging. These investigators are in various departments in the Medical School and throughout the Main Campus. In order to provide a focus for these activities and encourage additional work in this area, this application requests funding for the development of infrastructure in support of research in aging and health. The primary objectives of this project are to 1) Build an intellectual home for research related to aging and promote the interdisciplinary exchange that will enrich the dimensionality and depth of that research; and 2) Enhance current and encourage new research on aging by supporting current researchers, by exploring and developing training opportunities for undergraduate and graduate students, and by providing for transdisciplinary training at student and professional level to develop ancillary skills. In support of these aims, we propose to 1) Develop a seminar series on aging; 2) Improve library resources and services; 3) Create a roster of active individuals and departments; 4) Develop a newsletter and web site; 5) Expand student outreach; and 6) Work with administration to bridge institutional boundaries. We are requesting funding to support the time of two members of a steering committee (the third will be supported by Georgetown University), a statistical consulting service and data core, two experienced consultants who will propose and evaluate activities, and a fund that will be used to encourage, via small grants, new initiatives in aging throughout the Georgetown community. Georgetown brings unusual resources to this enterprise. It has a well-established medical center that includes faculty from the school, the hospital, and Lombardi Cancer Center. The Georgetown Public Policy Institute, well-established departments in the social and biological sciences, the Kennedy Institute of Ethics, and the National Reference Center for Bioethics Literature are housed at Georgetown University.

Grant: 1K08AG021921-01
Program Director: STAHL, SIDNEY M.
Principal Investigator: BARNATO, AMBER E MD
Title: Hospital-level Variation in Treatment Intensity
Institution: UNIVERSITY OF PITTSBURGH AT PITTSBURGH PITTSBURGH, PA
Project Period: 2003/06/01-2008/05/31

DESCRIPTION (provided by applicant): The purpose of this proposal is to provide Dr. Amber Barnato with the means and structure to transition to an independent investigator. The candidate is a new Assistant Professor at the University of Pittsburgh with fellowship training in health services research. Her long-term career goal is to conduct and disseminate research that informs Medicare financing policy and the delivery of health care to older Americans, motivated by the coincident rise in technological capabilities of health care and the expected doubling of the population over age 65 by 2030. In the context of this career award application, which contains a well-defined curriculum in quantitative and qualitative methods and has the institutional support of a highly successful Division of General Internal Medicine and the commitment of practiced mentors Drs. Derek Angus and Judith Lave, the candidate will study hospital-level variation in treatment intensity at the end of life. Regional analyses demonstrate that elders in Miami spend twice as much on health care in the last 6 months of life as those in Minneapolis and are 4 times more likely to be admitted to an ICU during that period, without any measurable outcome benefit. Studying hospitals, rather than regions, may be more informative since they are where clinical decisions are actually made and most likely to be influenced. Yet there is very little hospital-level research on end-of-life care, and that which exists is limited by focusing only on patients who have been retrospectively identified as decedents, having data on too few hospitals to be more generalizable, or focusing only on patients already admitted to an ICU. Using a single state with uniform regulatory and reimbursement structures and an unusually clinically-rich hospital discharge database, this study will: 1) Measure hospital-level rates of ICU admission and intensive procedure use in Pennsylvania; 2) Identify the hospital-level correlates of intensive treatment at the end of life; and 3) Determine the effects on survival and inpatient costs of varying hospital treatment intensity. This is a secondary database analysis augmented by primary data collection at the hospital level. This research may help to identify policy-relevant organizational factors that can be influenced to improve the care of older Americans at the end of life. This award will facilitate the candidate's transition to an independent health services researcher will lead to future funded studies and quality-improvement activities in Pennsylvania hospitals.

Grant: 5K08AG020145-02
Program Director: STAHL, SIDNEY M.
Principal Investigator: FITCHETT, GEORGE PHD
Title: The Role of Daily Spirituality in the Disease Process
Institution: RUSH-PRESBYTERIAN-ST LUKES MEDICAL CTR CHICAGO, IL
Project Period: 2002/09/01-2007/08/31

DESCRIPTION (provided by applicant): This application is for a five year period during which I will devote 75% of my time annually to the educational and research activities described in this proposal. Education: Two types of educational activities are proposed. The first will be earning a Ph.D. degree with a concentration in Epidemiology and Biostatistics from the School of Public Health at the University of Illinois at Chicago. The course work for the degree will be concentrated in the first 2 years of the award, but will continue throughout the award. Course work in the ethics of research will be included. The second type of educational activity will be consultation with my mentor, co-mentor, and other consultants as I pursue 3 specific research projects. This research activity will be concentrated in the last 3 years of the award. Research: The 3 research projects proposed here are designed to answer 2 questions. First, do daily spiritual experiences, such as awe and gratitude, affect health? Second, where in the disease process do these spiritual experiences exert their effect? By employing 3 different endpoints, the projects proposed here will permit us to examine three different ways in which spiritual experiences may exert an effect on the disease process: by reducing CV risk factors, by diminishing subclinical disease, or by reducing disability. We propose to answer these two questions by examining the relationship between spirituality and health in two large, heterogeneous, community-based studies, the Study of Women's Health Across the Nation (SWAN), and the Chicago Health and Aging Project (CHAP). Environment: Rush-Presbyterian-St. Luke's Medical Center has an extensive research program in many departments. The persons who have agreed to be my mentors are Rush investigators with nationally recognized expertise in longitudinal studies of health in middle age and older adults. Goals: My goal is to develop the skills to independently conduct high quality research that furthers our understanding of the role of religion and spirituality in both maintaining health and coping with illness. In addition, I would like to help health professionals translate information from this research into more effective clinical care and provide education in research about religion/spirituality and health for other health professionals.

Grant: 5K08AG019180-03
Program Director: SHRESTHA, LAURA B.
Principal Investigator: LANGA, KENNETH M MD
Title: IDENTIFYING CASES AND COSTS OF DEMENTIA IN THE U.S.
Institution: UNIVERSITY OF MICHIGAN AT ANN ARBOR ANN ARBOR, MI
Project Period: 2001/08/15-2006/07/31

DESCRIPTION (applicant s abstract): Dr. Kenneth Langa is a General Internist and faculty member in the Department of Internal Medicine and the Institute for Social Research at the UM. He gained research experience while earning a Ph.D. in Public Policy at the UC and completing the Robert Wood Johnson Clinical Scholars Program at the UM. During his fellowship training he initiated pilot studies on direct and informal caregiving costs of dementia while working as a Collaborator on the NIA-funded Health and Retirement Study (HRS). His immediate career goal is to obtain new clinical and research skills required for the longitudinal study of cognitive impairment in both clinical and population-based settings; his long-term goal is to lead multidisciplinary research efforts to better understand the social and economic impact of dementia on patients, families, and society. The UM provides a uniquely rich environment to support training in the study of aging and cognitive impairment. Dr. Langa will be mentored by senior faculty in the Institute for Social Research, Medical School, Michigan Alzheimer's Disease Research Center, and School of Public Health. He will benefit from his established collaborations with the principal investigator (Robert J. Willis, Ph.D.) and Co-Investigators of the HRS. The research plan will utilize 6 waves of HRS data (collected between 1993 and 2004) to study the direct and informal caregiving costs of cognitive impairment in a population-based nationally representative sample. The longitudinal design (with up to 11 years of follow-up) and extensive data on socioeconomic status, co-morbidities, and informal caregivers will be used to determine the relationship between severity of cognitive impairment (from mild or pre-clinical to severe disease) and direct and family caregiving costs. Longitudinal models will identify determinants of the incidence and progression of cognitive impairment, as well as nursing home admission and death. Markov models will be developed to estimate the lifetime costs associated with cognitive impairment, and determine the distribution of costs across age, gender, race, socioeconomic status, and public (Medicare and Medicaid) and private payers. This project will better define the economic impact of the growing prevalence of dementia in the United States, as well as the potential benefits of new treatments to prevent or slow the progression of this costly and increasingly common condition.

Grant: 5K08AG000864-05
Program Director: PATMIOS, GEORGEANNE
Principal Investigator: MURMAN, DANIEL L MPH
Title: PREDICTORS OF DIRECT COSTS IN ALZHEIMERS DISEASE
Institution: MICHIGAN STATE UNIVERSITY EAST LANSING, MI
Project Period: 1999/08/01-2004/07/31

Career Development Plan and Institutional Resources Summary. The career development plan consists of five years of focused instruction in epidemiology and health services research. Through a combination of course work and individual tutorials, enhanced research skills will be developed in three core areas: health economics and cost analysis; advanced methods in statistical modeling; and introduction to the use of administrative and national survey data. These new skills will provide a foundation for an independent research career in dementia, health services research focused on determinants of health care utilization, costs and response to interventions in naturally occurring populations. Michigan State University has a strong tradition in both epidemiology and health serviceS research. This environment will provide frequent opportunities for interaction will colleagues with similar research interests for career guidance, critique of ongoing research, and development of new research ideas. Research Plan Summary. Alzheimer's disease (AD) imposes a great economic burden on patients, their families and society. New treatments for AD are being developed to modify clinical features of the disease, but the relationships between these clinical features and direct health care costs are not known. We will build a data set for investigating determinants of direct heath care costs in an AD population. The Behavioral Model of Health Services Use will provide a conceptual framework for data collection and analysis. We will measure direct health care costs in a well-characterized cohort of 300 probable AD patients over four years, by repeated survey measurements and linkage to HCFA administrative data. We will examine the relationships between direct costs and six "need" factors hypothesized to be important determinants of direct, health care costs in AD. These six "need" factors (ie, severity of the AD patient's cognitive, psychiatric, and motor impairment, co-morbid medical conditions, "dependency" and caregiver "perceived burden") will be measured with validated, clinical measurement instruments. We will use multiple regression analysis techniques, including path analysis, structural equation modeling, and general longitudinal modeling to test study hypotheses. This project will develop explanatory and predictive statistical models of direct health care costs in AD patients, that can help focus and evaluate future interventions in this disease.

Grant: 5K08AG019516-03
Program Director: STAHL, SIDNEY M.
Principal Investigator: RIGLER, SALLY MD
Title: Urban-Rural Sedative & Anxiolytic Use in Long Term Care
Institution: UNIVERSITY OF KANSAS MEDICAL CENTER KANSAS CITY, KS
Project Period: 2001/09/15-2006/08/31

DESCRIPTION: (Applicant's abstract) Sally K. Rigler, MD, is an academic geriatrician whose clinical experience in long-term care (LTC) led to a strong research interest in prescribing patterns for nursing facility residents. This proposal provides support for formal coursework and implementation of two mentored research projects using quantitative and qualitative methods to address the prescribing of inappropriate benzodiazepine and sedative-hypnotics (Benz/Sed) medications in nursing facilities, with particular focus on potential urban-rural differences. Two interrelated perspectives will ground this work: 1) examination of large-scale prescribing trends from 1992-98, using the Kansas Minimum Data Set (MDS), of Benz/Sed drugs; and 2) qualitative evaluation of prescribers' beliefs about what factors are influential in LTC when making prescribing decisions regarding these medications. Both approaches will examine urban-rural differences. **Career Development Plan:** The candidate will undertake coursework in quantitative and qualitative methods, along with research conferences, junior faculty writers' group meetings, and other formal mentoring activities under the primary Sponsorship of Dr. Stephanie Studenski, Director of the Center on Aging, University of Kansas Medical Center. **Research Program:** a) Quantitative Project (emphasized Years 1 - 2): The applicant's previous experience with Kansas MDS data is outlined in the proposal; she is aware of its limitations and opportunities. She will investigate use of Benz/Sed medications in Kansas nursing home residents, with special emphasis on those deemed inappropriate for older adults. Urban-rural and time effects will be examined; the 1992-98 data provide information about prescribing patterns prior to recent regulatory changes in the nursing home survey process. Dr. A. Kramer, a senior-level investigator with expertise in secondary data, will serve as Co-sponsor for the quantitative project. b) Qualitative Project (emphasized Years 3 - 5): The candidate will gain new research skills in qualitative methods under the guidance of Dr. D. Stull, Professor of Anthropology, Univ. of Kansas, Lawrence campus. The initial qualitative work will use prescriber focus groups and interviews of consultant pharmacists and directors of nursing, to broadly capture themes about what factors influence prescribing decisions in LTC, emphasizing decisions about Benz/Sed drugs. Potential urban-rural differences will be examined. Further detailed interviews with physician and nurse practitioner prescribers will take place, using insights gained during initial focus groups. Finally, a survey tool will be developed based on these results, followed by modification and validation in preparation for a future broader survey of LTC prescribers. The candidate's goal is to become an independent investigator in the area of prescribing influences in LTC, for the ultimate purpose of developing, implementing, and evaluating targeted interventions to improve prescribing for nursing facility residents.

Grant: 5K08AG021616-02
Program Director: SHRESTHA, LAURA B.
Principal Investigator: WONG, MITCHELL D BA
Title: Racial and Ethnic Disparities Health Policy Model
Institution: UNIVERSITY OF CALIFORNIA LOS ANGELES LOS ANGELES, CA
Project Period: 2002/09/30-2007/08/31

DESCRIPTION (provided by applicant): Dr. Wong is a general internist who seeks support for further training in Epidemiology, Demography and Markov modeling methods. His principal research goals are to understand the pathways contributing to the racial and ethnic disparities in health care and outcomes, including health-related quality of life and mortality, and to identify areas of health and specific interventions to most efficiently eliminate these disparities. Dr. Wong is well trained in Health Services research, having obtained a Ph.D. in this area from the UCLA School of Public Health. He is strongly committed to research in racial and ethnic disparities, focusing on chronic illnesses and their outcomes. Transitioning from work on specific diseases, such as HIV, Dr. Wong now pursues to create a comprehensive and multidisciplinary clinical model to understand how chronic diseases contribute to lower life expectancy among minorities. To obtain the advanced skills for this research, he is now applying for a career development award. The mentorship committee has been carefully selected to supervise Dr. Wong's training in Epidemiology, Demography and Markov modeling. This training includes coursework at UCLA in the School of Public Health and Sociology Department and self-directed tutorials in Demography and Markov modeling. As sponsor of the Mentored Clinical Scientist Development Award, Dr. Martin Shapiro will oversee his educational goals, career development and execution of his research plan. Dr. Eileen Crimmins, who is a Professor of Sociology and Gerontology with a degree in Demography, will also closely supervise the proposed research plan. The award will provide five years of supervised experience enabling Dr. Wong to develop his potential to become an independent investigator and a leader in health policy research related to racial and ethnic disparities in care. The overall objective of the research plan is to create a Markov cycle tree simulation model that will provide a broad clinical model of racial and ethnic disparities in mortality (Disparities Health Policy Model). Using this model, Dr. Wong will identify those diseases that contribute most to the disparities in mortality among African Americans, Latinos, and Asians compared to Whites. The Disparities Health Policy Model will also allow us to determine the degree to which the lower life expectancy among African-Americans can be attributed to a greater risk of getting a disease as opposed to a higher death rate from the disease once it has developed. Finally, we will use the model to predict the impact of selected clinical and policy interventions on the racial disparity in years of potential life lost.

Grant: 5K12AG000982-05
Program Director: PATMIOS, GEORGEANNE
Principal Investigator: MANTON, KENNETH G MA
Title: SCIENTIFIC RECRUITMENT FOR THE DEMOGRAPHY OF AGING
Institution: DUKE UNIVERSITY DURHAM, NC
Project Period: 1999/09/30-2004/08/31

The goals of this project are to recruit three scientifically established senior scientists from relevant disciplines to five-year K-12 fellowships in which they will redirect their major career focus to studying the demography of aging and to conducting significant research in the demography of aging. To help these investigators make this professional and scientific transition, they will select (after interviewing with interested investigators) scientific mentors who currently have active NIA research projects on the Demography of Aging at CDS. They will participate in the research projects of the selected mentors in multiple ways. They will be involved in the conceptualization of specific substantive studies, in the collection and preparation of data, in the analysis of data, and in the preparation of articles and monographs for the scientific peer-reviewed literature. It is expected that the research base for these persons will be in the Center for Demographic Studies (CDS) at Duke University. It is also expected that they will develop (and will be aided in developing) appointments in one of the regular academic departments of Duke University. It is expected that they will involve graduate students and post-doctoral fellows in their own research on the demography of aging as it develops. It is also expected that they will generate significant NIA-funded research projects on the demography of aging on their own (i.e., as principal investigators) so as to add to the critical mass of demographic research on aging at CDS and Duke University. It is expected that after their five-year appointments, they will continue at Duke University on their own funded research programs and with regular faculty appointments in academic departments. It is also expected that they will enrich the aging research environment at CDS and Duke University by bringing knowledge from their prior area of scientific specialization in order to help expand the knowledge base at CDS on which future demographic aging projects can be based. Thus, it is expected that, by recruiting scientifically established researchers, with considerable research potential, that the scientific enrichment will indeed, be an intellectual two-way "street" for the K-12 fellows and CDS's research program.

Grant: 5K12AG000981-05

Program Director: SHRESTHA, LAURA B.

Principal Investigator: WACHTER, KENNETH W. PHD
MATHEMATICS:STATISTICS

Title: CAREER AWARD PROGRAM IN DEMOGRAPHY OF AGING

Institution: UNIVERSITY OF CALIFORNIA BERKELEY BERKELEY, CA

Project Period: 1999/09/30-2004/08/30

The Principal Investigator and three co-investigators are all members of the Department of Demography at the University of California at Berkeley. They seek to increase the number of leading scientists in the demography of aging by hiring and mentoring researchers at early or middle formative stages in their careers. It is likely that one of the candidates will be an early post-doctoral scholar and that the other will be from among late junior faculty candidates; the Program as formulated here broadly proposes to mentor one of each. The proposal relies on four of Berkeley's major strengths in the field of population aging: 1. The four investigators have substantial experience in teaching, research, mentoring, and public service. The four investigators from that department have received substantial recognition, much of it for work in the demography of aging, including membership in the National Academy of Sciences (3), fellows of the American Academy of Arts and Sciences (2), the current winner of the Irene Taeuber Award from the Population Association of America, the Mindel Sheps Award (2), past chairs of the National Research Council Committee on Population (2) and membership on the current Council of the International Union for the Scientific Study of Population (1). 2. An interdisciplinary group of social science researchers with active research interests in the broad field of population aging. An NIA-funded Center on the Economics and Demography of Aging (CEDA) serves as the focal point for its member researchers, who come from such fields as business administration, demography, entomology, health economics, law, and public policy. 3. A wider group of researchers on aging in the biological sciences and in the professional schools of public health and social welfare, clustered around the Academic Geriatric Center on Aging. The in-coming Director of this Center is also Vice-Chair of CEDA and recipient of an NIA K-07 Academic Career Leadership Award to coordinate all aging-related activities in the Berkeley region. 4. The opportunity to work under mentors whose current research interests lie in one of four fields: biodemography of aging; analysis of intergenerational transfers; cross-national research on mortality at extreme ages; developing perspectives on aging grounded in evolutionary anthropology.

Grant: 5K12AG000983-05
Program Director: SHRESTHA, LAURA B.
Principal Investigator: WISE, DAVID A PHD
Title: NBER CAREER AWARD PROGRAM IN THE DEMOGRAPHY OF AGING
Institution: NATIONAL BUREAU OF ECONOMIC RESEARCH CAMBRIDGE, MA
Project Period: 1999/09/30-2004/08/31

The NBER has become a leading research and training Center in aging, bringing together a large group of economics scholars at various points in their research careers to focus collectively on issues in aging. The proposed career award program in the demography of aging would build on this core program of research and training activity in aging. Indeed these highly successful ongoing activities would leverage the new program in the demography of aging to a level of excellence that we believe can create first-rate research scholars in demography, as well as providing a new foundation for NBER research on issues in the demography of aging. Building on our strengths, the NBER program would emphasize economic demography, focusing on issues that are at the juncture of demography and economics. The new commitment to demography is a natural direction of development for the ongoing NBER program, and represent an area of research in aging where the economics research community should be directing more attention. While most of the issues being addressed by the NBER research team in aging are at least broadly related to the changing age-structure of the population in the United States (and the world), only a subset of this research deals directly with demographic change and its implications. Our aim through this award is to facilitate the intellectual development of economics scholars toward issues in the demography of aging, and to expand our overall research agenda in the area of demography. Recipients of career development awards in demography would be selected from leading research universities around the country, and would come to the NBER for a year of intensive research on issues in the demography of aging.

Grant: 5K23AG019652-03
Program Director: PATMIOS, GEORGEANNE
Principal Investigator: COLEMAN, ERIC A MD
Title: Reducing Fragmentation Across Sites of Geriatric Care
Institution: UNIVERSITY OF COLORADO HLTH SCIENCES AURORA, CO
CTR
Project Period: 2001/09/15-2004/06/30

DESCRIPTION (provided by applicant): Candidate. Dr. Coleman has completed fellowships in the Robert Wood Johnson Clinical Scholars Program and Geriatric Medicine. He holds an appointment of Assistant Professor of Geriatric Medicine at the University of Colorado Health Sciences Center. The applicant's long-term goal is to develop a career as an independent investigator in patient-oriented research. His immediate goals are (a) to study care fragmentation in older patients who receive care in multiple settings; (b) obtain additional methodologic expertise with formal coursework; (c) participate in a team research environment learning all aspects of health services research in aging; and (d) participate in geriatric clinical activities. The Environment. Dr. Coleman's research office will be in the Center on Aging Research Section, which houses 18 health services researchers dedicated to the study of healthcare quality and outcomes in the older population. His sponsor is Dr. Andrew Kramer, Professor of Geriatric Medicine, and his co-sponsor is Dr. Richard Besdine, Director, Center for Gerontology and Health Care Research at Brown University. Dr. Coleman's formal research appointment with Kaiser Colorado will facilitate access to study subjects, utilization data and additional research collaborators. The Research. During an episode of illness, older patients often require care from different practitioners in multiple settings, placing them at risk for receiving fragmented care. Effective interventions are needed to reduce care fragmentation across settings of geriatric care. However, this line of inquiry is severely constrained by the absence of a validated instrument designed to measure the important attributes of care fragmentation. Our first aim is to develop and test a care fragmentation instrument. Our second aim is to test the feasibility of an intervention designed to reduce care fragmentation. Our third aim is to initiate a randomized controlled trial of this intervention. The results of this research will improve our ability to quantify care fragmentation and subsequently measure the effectiveness of a targeted intervention.

Grant: 5K23AG001033-03
Program Director: STAHL, SIDNEY M.
Principal Investigator: DAALEMAN, TIMOTHY P DO
Title: Challenging Life Events in Older Persons
Institution: UNIVERSITY OF NORTH CAROLINA CHAPEL CHAPEL HILL, NC
HILL
Project Period: 2001/09/30-2006/08/31

DESCRIPTION (provided by applicant): Timothy P. Daaleman, DO, is a family physician researcher with expertise in examining the influence of religious and spiritual variables in healthcare settings. This application will provide a period of mentored training comprised of: a research practicum within the Center on Aging at the University of Kansas Medical Center (KUMC); coursework in the Masters in Public Health (MPH) program and at the University of Kansas in Lawrence; and a research project to test a theoretical model of the relationship between spirituality and patient conceptualization of death and dying in a population of community-dwelling elders with serious illness. The plan outlines the training and research experience he will require, in order to develop and launch a fully independent research career that will focus on understanding and improving the dying process and end-of-life care among elders in the United States. Career Development Plan: Course work from MPH program forms the core portion of the didactic training period and will be complimented by practical training in study design, subject recruitment, data collection and analysis, and project management within the KUMC Center on Aging. Research Program: The SUPPORT trial not only awakened American medicine to reexamine the way it cares for seriously ill and dying patients, but also has indirectly promoted a rapprochement among the realms of spirituality, religion, and the practice of medicine. An understanding of the psychological, social, cultural, and now spiritual elements and processes that are involved in the composition of death and dying attitudes holds promise in comprehending and potentially improving the difficult transition that older patients make from serious illness to dying. The overall objective of this research project is to describe and understand the determinants of elders attitudes toward serious illness, death, the dying process, and discussions of advance care planning. Both rural and urban primary care physicians (N=10) who have been members of the Kansas Hartford Geriatric Project, and older community-dwelling patients with serious illness from their practices (N=270), will participate in three phases of the study: a cross-sectional survey, a prospective, longitudinal cohort study, and qualitative semi-structured interviews. The primary aim is to determine the social, psychological, spiritual, and cultural influences that comprise attitudes towards death and the dying process in older persons. Our hypothesis is that patient spirituality is a significant explanatory factor in death attitudes after accounting for multiple covariates, i.e. social support, mental health status. Secondary aims include learning how a baseline measure of patient spirituality predicts future death attitudes and discussions of advance care planning.

Grant: 5K23AG019809-02
Program Director: STAHL, SIDNEY M.
Principal Investigator: HINTON, WALTER L MD
Title: Dementia Caregiving: Burden and Help-Seeking in Latinos
Institution: UNIVERSITY OF CALIFORNIA DAVIS DAVIS, CA
Project Period: 2002/07/01-2007/06/30

DESCRIPTION (provided by applicant): The purpose of this Mentored Patient- Oriented Research Career Development Award is to further the growth of my research skills so that I can become an independent and productive researcher focused on reducing family caregiving burden and improving care for Latino elderly with dementia-related mental and behavioral disturbances. This Award builds directly on my training in medical anthropology, health services research, and geropsychiatry. The five-year plan for career development emphasizes four areas: 1) longitudinal quantitative methods and analysis, 2) qualitative methods and analysis, 3) cultural dimensions of Latino family caregiving, and 4) geropsychiatric aspects of dementia assessment and management. Five different learning modalities are emphasized: a) formal coursework, b) supervised reading tutorials, c) research colloquia and seminars, and d) on and off-site practical with mentors. The final and most important modality is supervised development and implementation of a longitudinal research project. The research project I propose is a three-year investigation that integrates qualitative and quantitative methods to assess burdens that family caregivers of elderly face and where they turn for help. This project's specific aims are a) to identify factors (e.g., disease characteristics, caregiver characteristics, illness meanings, social network features, accessibility Of the local health care system) that influence whether and where Latino families seek help for dementia neuropsychiatric symptoms, and b) to examine the mental health consequences (e.g., caregiver strain due to neuropsychiatric symptoms, depressive symptoms, cultural idioms of distress) of dementia neuropsychiatric symptoms on family caregivers. The learning goals and career development activities outlined in this revised application will equip me to be a successful and independent investigator in minority aging, a clinical expert in assessing dementia and in managing related mental and behavioral disturbances, and a mentor for the next generation of investigators.

Grant: 5K23AG000932-05
Program Director: STAHL, SIDNEY M.
Principal Investigator: KLAPOW, JOSHUA C PHD
Title: REDUCING SERVICE USE IN OLDER PRIMARY CARE PATIENTS
Institution: UNIVERSITY OF ALABAMA AT BIRMINGHAM BIRMINGHAM, AL
Project Period: 1999/09/15-2004/08/31

Changes in the delivery of health care services for the elderly have it pertinent to establish a closer link between patient oriented research, the delivery of health care services and the development of health care delivery systems. Unfortunately, in the case of behavioral science, training in the development and delivery of clinical interventions for the elderly is not sufficient for competency in the development and evaluation of large primary health care delivery systems. The result is a wealth of behavioral science interventions that are never transitioned into primary health care delivery systems, and health care delivery systems that are often unable to adequately address the behavioral needs for elderly patients. This discontinuity between behavioral and medical care is highlighted in the mis- diagnosis and mismanagement of distress among the elderly in primary care. Psychological distress, in the absence of a psychiatric disorder is extremely prevalent among the elderly in primary care and accounts for a significant percentage of office visits, increased medical costs, and diminished health status and well being. Despite the prevalence and burden on the health care system, behavioral interventions are not a routine part of clinical care. A promising laboratory based written self-disclosure protocol has extensive evidence of reducing health care utilization, improving perceptions of health status and psychological well being in non health care seeking adults. The protocol has not, however, been integrated and evaluated in the geriatric primary care setting. The proposed study aims to evaluate the effectiveness of a self-disclose intervention in a randomized controlled trial in 195 elderly primary care patients enrolled in a managed care program. Primary outcome measures including service utilization and associated costs, health related quality of life, and distress, will be evaluated at baseline, 1 and 6 months post intervention. The proposed study is part of a 5-year career development plan consisting of course work and supervised research fieldwork focusing on the development and evaluation of health care delivery systems for the elderly. The proposed plan will provide the necessary training experiences to: 1. Function as an independent researcher developing and evaluating behavior science interventions to improve health status and reduce resource utilization in older primary care patients. 2. Obtain training experiences that will facilitate the integration of research findings into the development and evaluation of geriatric primary care delivery systems.

Grant: 5K23AG020054-03
Program Director: STAHL, SIDNEY M.
Principal Investigator: MITCHELL, SUSAN L MD
Title: Tube-feeding in Elderly: Decision-making and Outcomes
Institution: HEBREW REHABILITATION CENTER FOR AGED BOSTON, MA
Project Period: 2001/09/30-2004/08/31

DESCRIPTION (provided by applicant): The goal of the proposed development program is to prepare the applicant, Susan L. Mitchell MD for a career as an independent investigator and leader in the field of aging. The award will provide five years of supervised geriatrics health services research with the following specific objectives: 1. to develop expertise in innovative approaches to decision-making for older persons at the end-of-life, 2. to become an expert in outcomes research and resource utilization related to the use medical technologies in frail nursing home patients, and 3. to utilize this expertise in decision-making, health outcomes, and resource utilization to improve the end-of-life care in older persons by influencing clinical management and health care policy. The candidate will achieve these goals through mentored research, coursework, directed readings and educational activities. Dr. Lewis A. Lipsitz, an international leader in geriatrics, Professor of Medicine at Harvard Medical School, Chief of Geriatrics at the Beth Israel Deaconess Medical Center (BIDMC) and Co-Director of the Hebrew Rehabilitation Center for Aged (HRCA) Research and Training Institute will serve as sponsor. Dr. Lipsitz will ensure that Dr. Mitchell will have full advantage of the rich environment of the HRCA, a reknowned center dedicated to gerontological care and research, as well as the Harvard Division on Aging, BIDMC and Harvard School of Public Health. The proposed research is a randomized trial of a feeding tube decision aid for nursing home residents with advanced dementia with a one year follow-up of clinical outcomes and costs. The specific aims of the project are to determine: 1. whether a decision-aid (vs. usual care) improves the decision-making process for long-term tube-feeding, 2. the impact of a decision aid on the substitute decision-makers preferences for tube-feeding, 3. the impact of long-term tube-feeding (vs. no tube-feeding) on clinical outcomes and resource utilization in nursing home residents with advanced dementia. In addition to the proposed project, Dr. Mitchell will achieve her career goals by regularly scheduled meeting with Dr. Lipsitz, as well as members of her advisory panel including; 1. Drs. A. O Connor and A. Mulley - decision-making, health policy, 2. Dr. J. Buchanan - economic evaluation, 3. Dr. M. Gillick - bioethics, 4. J. Weinberg ScD - advanced statitstical methods and 5. Dr. M. Slaven - end-of-life care. Her research activities will be complimented by focussed clinical, educational and administrative activities including the associate directorship of the Harvard Geriatrics Fellowship Program. By the end of the award period the applicant will have the skills, experience and research track record necessary to become an independent investigator and leader in academic geriatrics.

Grant: 5K23AG019745-02
Program Director: STAHL, SIDNEY M.
Principal Investigator: OWNBY, RAYMOND L MD
Title: Information Technologies to Improve Patient Adherence
Institution: UNIVERSITY OF MIAMI-MEDICAL CORAL GABLES, FL
Project Period: 2002/07/01-2007/06/30

DESCRIPTION (provided by applicant): This application requests five years of support for Raymond L. Ownby, MD, PhD, to pursue research and training in applied cognitive aging and human factors research as applied to patient-oriented research. Through mentoring by Sara J. Czaja, PhD, Dr. Ownby will not only develop expertise in applying skills in these areas to a critical problem (medication adherence in elderly patients with memory deficits) but will also create a center for evidence-based practice in geriatric mental health. The research study to be completed during the period of support will use two information technology interventions to improve patients' adherence with medication regimens. Base on a model of adherence to medical treatment developed by Park and Jones (1997), information interventions will target key points in the medication adherence process. Pilot research has suggested that this model is valid for use with the patient population of this study (elderly patients with memory problems who either have or are at risk for developing Alzheimer's disease). During the last two years of support, Dr. Ownby will develop a research proposal drawing on results of the research study to develop a large-scale multicenter clinical trial of information technology interventions for adherence in other geographical sites and with other patient populations. It is anticipated that this application will seek funding through the RO1 mechanism. The professional development program to be followed by Dr. Ownby comprises regular meetings with Dr. Czaja, work on the proposed research study, didactic coursework, workshops, and seminars in the areas of human factors, information technologies, statistics, research design, evidence-based practice, and the responsible conduct of research. Through regular meetings and research supervised by his mentor and regular meetings with co-mentors, Dr. Ownby will be able to integrate his professional experience as a clinical psychiatrist and neuropsychologist with didactic training in human factors and applied cognitive aging to create novel strategies to improve patient adherence, to develop a large-scale clinical trial of these strategies, and to apply principles of evidence-based practice to develop a Center for Evidence-Based Practice at the University of Miami. This center's mission will be to disseminate research findings in geriatric mental health through systematic reviews, meta-analyses~ and treatment guidelines made available through traditional publication routes and the World Wide Web. The Center will foster new research in applications of information technologies to the mental health problems of the elderly and provide leadership and training in applying information to clinical practice. The professional development program will thus allow Dr. Ownby to develop expertise in creating information technology applications for use in healthcare with the elderly, provide him with key tools in designing and carrying out large-scale Clinical trials, and enable him to use results of research studies to guide clinical practice in geriatrics. The period of proposed support will thus allow Dr. Ownby to develop as a clinical researcher capable of carrying out patient-oriented research studies and give him additional tools in applied cognitive aging and human factors research, especially applications of emerging information.

Grant: 5K23AG001018-04
Program Director: STAHL, SIDNEY M.
Principal Investigator: PANTILAT, STEVEN Z MD
Title: IMPROVING INPATIENT PALLIATIVE CARE FOR OLDER ADULTS
Institution: UNIVERSITY OF CALIFORNIA SAN FRANCISCO SAN FRANCISCO, CA
Project Period: 2000/08/15-2005/07/31

DESCRIPTION: (From application) The applicant states that most elders in the US die in acute care hospitals where serious shortcomings in end-of-life care are endemic. Palliative care has made substantial improvements in the care of older Americans at the end of life, but these advances have been largely limited to the outpatient setting. The American Geriatrics Society (AGS) position statement on the care of dying patients outlines specific issues that should be addressed in palliative care, including relief of symptoms such as pain, dyspnea, and anxiety, as well as attention to the emotional, psychological and spiritual needs of the patient and family. The applicant has developed a novel approach to addressing the issues raised in the AGS position statement. This grant application has two complementary long-term goals: 1) to improve palliative care for hospitalized elders, and 2) to provide an experience for the applicant, leading him to a career as an independent investigator in aging by supporting an incremental research and training program. During the first three years of the proposed award, the applicant plans to conduct a clinical trial whose aim is to determine whether a multidisciplinary palliative care consultation will improve management of three critical symptoms (pain, dyspnea, and anxiety), advance care planning, and spiritual issues for seriously-ill, hospitalized older patients. The proposed program of palliative care consultation is based on a conceptual model of terminal illness in which biological, psychological, spiritual, and social factors lead to suffering and death. The proposed research will test the following five specific hypotheses: Compared with usual care, seriously ill, hospitalized older patients who receive a daily, multidisciplinary palliative care consultation will: 1) have lower pain scores; 2) have lower dyspnea scores; 3) have lower anxiety scores; 4) be more likely to have their choice of a surrogate decision-maker documented by the primary teams; 5) be more likely to have the offer of chaplain services documented by the primary team. This proposal incorporates mentored- research experience, tutorials, structured reading, and courses that will develop the applicant's research skills necessary to design and conduct clinical trials and other patient-based research. In addition, it is anticipated that the proposed research will develop the UCSF palliative care service into a unit for conducting clinical research focused on improving inpatient palliative care.

Grant: 1K23AG020982-01A1
Program Director: STAHL, SIDNEY M.
Principal Investigator: PHELAN, ELIZABETH A MD
Title: Delivering Effective Primary Care to Older Adults
Institution: UNIVERSITY OF WASHINGTON SEATTLE, WA
Project Period: 2003/07/01-2008/06/30

DESCRIPTION (provided by applicant): Dr Phelan aims in the long-term to become a leader in improving the quality of health services, particularly primary care, for the elderly. Her research to date has combined her interests in health promotion, health care quality, and vulnerable populations and has involved survey methods and analyses of existing data. During the period of this K23 award, she will follow a program of research and training to ensure that she will possess both the skills and the experience to conduct patient oriented research as an independent investigator. Her research and training will be overseen by Dr Edward H. Wagner. Geriatric expertise and academic career guidance will be provided by Dr Itamar B. Abrass. Collaborators/advisors will include Drs Andrea Z. LaCroix and Eric B. Larson; James P. LoGerfo will serve as an advisor. Preserving function and independence is an important health outcome in the care of older adults. Individual (patient) risk factors for functional decline have been intensely studied, as have focused interventions for specific risk factors. However, little is known about the effects of provider practice or practice design features on the functional status of older adults. The proposed research will address these questions. The specific aims are: 1) to evaluate the effect of provider practice style on patient functional status and 2) to evaluate the feasibility and efficacy of integrating a geriatric care team into outpatient, primary care. The proposed projects will be led by the candidate under the supervision of her Sponsor, Dr Wagner. These investigations should contribute new insights into improving primary care of older adults in order to promote continued independent functioning. By permitting Dr Phelan to 1) obtain formal training in advanced epidemiologic and statistical techniques and 2) take a lead role in the conduct of a randomized trial of a new model of care for primary care settings, the Mentored Patient Oriented Research Career Development Award will enable her to meet her 5-year goal of achieving independent investigator status and move her toward her long-term, career goal described above.

Grant: 5K23AG000973-04
Program Director: STAHL, SIDNEY M.
Principal Investigator: RODRIGUEZ, MICHAEL A. MD
Title: ELDER ABUSE, ETHNICITY, AND HEALTHCARE SETTINGS
Institution: UNIVERSITY OF CALIFORNIA LOS ANGELES LOS ANGELES, CA
Project Period: 2001/08/15-2006/07/31

DESCRIPTION (applicant s abstract): Dr. Michael Rodriguez, MD, MPH, has developed expertise in the area of intimate partner abuse among ethnically diverse populations. Through mentoring relationships, structured integrated activities, and development of a research program, Dr. Rodriguez will advance his independence in conducting patient-oriented clinical research. Elder mistreatment is a significant health and social problem affecting all racial, ethnic, and socioeconomic groups. Although cultural values influence attitudes about mistreatment, little research has focused on understanding mistreated elders'perspectives on mistreatment. Furthermore, identification and management of elder mistreatment in health care settings are impeded by the lack of effective, culturally appropriate screening tools. In focus groups with mistreated Latino, African-American, and non-Latino Caucasian elders, Dr. Rodriguez will examine perceptions of mistreatment and identify factors that facilitate or hinder patient-provider communication about mistreatment. Similarly, focus groups with cognitively impaired elders, care givers, health care providers, and adult protective services workers will examine their perspectives on the definition of elder mistreatment and factors facilitating its identification in health care settings. A survey instrument will be developed using results from focus groups, current literature, and expert advice, and will include screening questions, established measures of abuse and neglect, patient preferences for health care interventions, demographic, and descriptive data. The survey will be administered to an ethnically diverse, clinic-based sample of elderly patients, and resulting data will provide information on risk factors for eider mistreatment and the utility of the screening questions. The goals of this study are to: (1) examine mistreated elders'perceptions of mistreatment and the role of health care providers in addressing elder mistreatment; (2) examine care givers, health care providers, and adult protective service workers perspectives on mistreatment and how health care providers can help victims; (3) identify risk factors for elder mistreatment; and (4) begin development of a screening tool for use in health care settings.

Grant: 5K23AG019635-02
Program Director: STAHL, SIDNEY M.
Principal Investigator: VIG, ELIZABETH K MD
Title: Understanding and Implementing End of Life Preferences
Institution: UNIVERSITY OF WASHINGTON SEATTLE, WA
Project Period: 2002/07/01-2007/06/30

DESCRIPTION (provided by applicant): Dr Vig aims to become an academic geriatrician and a nationally known expert on quality of life at the end of life. She has made preliminary steps toward this goal by completing a Master's degree in Public Health, and by obtaining funding through a Pfizer/American Geriatrics Society Postdoctoral Fellowship to fund her initial research project. Her research to date has combined her interests in geriatrics, medical ethics, and the end of life. She has used qualitative and quantitative methods to better understand older adults' and terminally ill adults' views of the end of life. During the period of this K23 award, she aims to progress from a semi-independent to an independent investigator by following a program of research and training. Her career development and training will be overseen by Dr Robert Pearlman with additional assistance from Drs Itamar Abrass, and J Randall Curtis. The research and training program will take place at the University of Washington, which has rich resources and personnel to promote Dr Vig's career development. The proposed program will include 1) selective coursework in biostatistics and qualitative methodologies, 2) experience in evaluation of research proposals, and 3) experience in program evaluation. The proposed research aims to promote quality of life at the end of life by investigating the patient and family perspective on the use of advance care planning (ACP) and hospice services. Advance care planning and hospice allow patients to forgo aggressive care at the end of life. ACP identifies preferences that will direct care in the case of decisional incapacity, a common occurrence at the end of life. Hospice services implement patients' care preferences when death in the near future is anticipated. The first project will characterize how advance care planning influences decisions made in "real time" and how proxies respond to the task of surrogate decision-making. The second project will characterize patient and family understandings of hospice and identify the barriers from the patient/family perspective that prevent timely access to hospice services. Study participants will complete interviews containing open ended and closed-ended questions. Both qualitative and quantitative methodologies will be used to analyze participant responses. The long term goal of these two projects is to improve the quality of end-of-life care by promoting advance care planning and access to hospice services to people with life-limiting illness, their families, and loved ones.

Grant: 1K23AG020088-01A2
Program Director: STAHL, SIDNEY M.
Principal Investigator: WEINER, MICHAEL MD
Title: Recommendations of Inpatient Geriatrics Consultation
Institution: INDIANA UNIV-PURDUE UNIV AT INDIANAPOLIS, IN
INDIANAPOLIS
Project Period: 2003/07/01-2008/06/30

DESCRIPTION (provided by applicant): Michael Weiner, MD, MPH is a board-certified, fellowship-trained internist. As Assistant Professor in the Division of General Internal Medicine and Geriatrics in the Department of Medicine at Indiana University (IU) and Scientist in The Regenstrief Institute for Health Care (RIHC) and the IU Center for Aging Research (IUCAR), he now spends 70% of his professional time in research. He has an extensive background in information systems, and he has used large databases and studied the impact of information systems in healthcare. Dr. Weiner's 35 months on faculty have been successful because of his talents and training as well his rich environment. The IU School of Medicine Faculty care for a large population of older patients in a state-of-the-art clinical laboratory. Clement J McDonald, MD developed one of the world's largest and most comprehensive medical records systems on site. Christopher M. Callahan, MD is founding director of IUCAR, whose primary research themes are health promotion and the management of chronic conditions among older adults in primary care and community settings. Steven R. Counsell, MD is Director of Geriatrics at IU. Dr. Weiner seeks to pursue a research career focusing on improving coordination and quality of care for older adults. The goal of this proposal is to help Dr. Weiner bridge the gap between his early intramural support and eventual extramural funding as an independent faculty researcher. Dr. Callahan will be the primary mentor, and Drs. McDonald and Counsell will be the secondary mentors. Dr. Weiner will also pursue formal training in clinical geriatrics, quality of health care, behavior change, and clinical trials. Geriatrics consultants provide a team approach and coordination of many services for hospitalized older patients, but the consultants' effectiveness is limited by primary-care physicians' failures to adopt most recommendations. In the proposed study, we seek to measure and improve aspects of implementation of consultants' recommendations. The specific aims of this proposal are to conduct a prospective study of inpatient geriatrics consultation, to identify specific determinants of implementation; present findings and themes to focus groups of physicians and patients, to generate consensus on barriers to implementation and potential solutions to these barriers; and study the effectiveness of a pilot intervention to improve implementation of recommendations from the inpatient geriatrics team.

Grant: 1K24AG021507-01
Program Director: CHON-LEE, ANGIE J
Principal Investigator: GILL, THOMAS M MD
Title: Research Training in Disability & Disabling Disorders
Institution: YALE UNIVERSITY NEW HAVEN, CT
Project Period: 2003/01/15-2007/12/31

DESCRIPTION (provided by applicant): The specific aims of this Midcareer Investigator Award in Patient-oriented Research are: (1) to further establish the candidate's independent patient-oriented research program in the epidemiology and prevention of disability among community-living older persons; and (2) to establish a formal mentorship program for junior investigators, across disciplines, who are pursuing patient-oriented aging research related to disability and disabling disorders. This includes functional assessment in general as well as the functional consequences of highly prevalent disease-specific conditions such as arthritis, heart disease, diabetes, stroke, cancer, depression, and dementia. The candidate's ultimate objective is to build a premier program in patient-oriented research related to disability and disabling disorders. During the past ten years, the candidate has established a highly successful and independent patient-oriented research program addressing fundamental issues related to the epidemiology and prevention of disability. A K24 Award will permit the candidate to further advance the scientific knowledge base of this serious and pervasive problem in geriatric medicine by affording him the protected time to complete the patient-oriented research projects proposed in this application. This program of research, in turn, will provide the platform for the candidate's greatly expanded mentorship program, which will include didactic training, hands-on research mentorship, and a research infrastructure (data analytic and research assistant support). The candidate plans to accept two to three junior investigators into the program during each of the first two years. Subsequently, the number of accepted candidates per year will vary to achieve the ultimate goal of having 5 to 6 active trainees at any one time. The Yale environment provides the ideal setting, replete with interdisciplinary research and training programs, interdisciplinary expertise and collaboration, and resources (e.g., methodological consultation, biostatistical support, access to study populations and databases) to foster the candidate, the proposed research projects, and the mentorship program. In summary, the candidate's accomplishments in patient-oriented research, his ability and commitment to mentoring junior investigators, and the research and training strengths of Yale combine to provide an ideal context for successfully carrying out the specific aims of this proposal.

Grant: 1K24AG022399-01
Program Director: STAHL, SIDNEY M.
Principal Investigator: LACHS, MARK S MD
Title: Mid Career Mentoring Award In Patient-Oriented Research
Institution: WEILL MEDICAL COLLEGE OF CORNELL UNIV NEW YORK, NY
Project Period: 2003/09/01-2008/07/31

DESCRIPTION (provided by applicant): This application proposes use of the NIA mid-career award in patient-oriented research to create and sustain a mentoring program for aspiring aging researchers at the Weill Medical College of Cornell University led by Dr. Mark Lachs. Dr. Lachs is a geriatrician and clinical epidemiologist with expertise in the areas of elder mistreatment, protective services, and functional status. He is also Directs the Cornell Center for Aging Research and Clinical Care (CCARCC), an institution wide entity seeded by an NIA Academic Leadership Award and formalized by the Dean in 2000. CCARCC's infrastructure will assist in identifying mentored trainees, provide additional resources to them (e.g., through its pilot grant program), and formally evaluate Dr. Lachs'K24 program through an external advisory committee led by Dr. William Hazzard. Two new patient-oriented research projects are proposed in the area of elder self-neglect (ESN). The specific aims of these are: (1) to estimate the contribution of executive dysfunction to self-care behaviors that may precede ESN, and (2) to determine if alcohol consumption is an risk factor for ESN. These studies hypothesize that ESN is a continuum of progressively more egregious low self-care states. ESN as chosen as a content area because (a) it is a multi-factorial syndrome likely to attract trainees with interests from diverse fields (e.g., geriatric medicine and psychiatry, neuropsychology, nutrition, alcohol, and medicaethics), (b) it is prevalent but studied despite substantial mortality and indignity, and (c) Cornell has an unusual depth of expertise (and potential mentees) in geriatric psychiatry in the form of the Cornell Geriatric Psychiatry Institute headed by George Alexopoulos. Preliminary data on depression and ESN are provided. Strengths of the candidate include his formal training in research methodology as an RWJ Clinical Scholar at Yale, his history of academic productivity and continuous NIH funding including an active RO1 in the area of crime and health in older people, and an early track record of mentoring junior trainees at all levels. Strengths of the institution include the resources of CCARCC, several aging related Centers at Cornell from which to garner potential mentees, the availability of divisional resources to "protect" promising trainees in the critical period between fellowship and initial extramural funding, and a divisional co-chief structure that can insulate the candidate from undue administrative and clinical burdens should this application be successful.

Grant: 5K25AG020148-02
Program Director: CHON-LEE, ANGIE J
Principal Investigator: PALMER, RAYMOND F PHD
Title: Trajectories of Functional Ability in Diverse Groups
Institution: UNIVERSITY OF TEXAS HLTH SCI CTR SAN SAN ANTONIO, TX
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Project Period: 2002/09/01-2007/08/31

DESCRIPTION (provided by applicant): Age-related functional ability is a dynamic state known to change over time. While there is some knowledge about the events and conditions predictive of functional decline, there is a gap in our understanding of individual trajectories or rates of change of functional ability over time. The goal of this project is to examine antecedent predictors and mediating processes of individual trajectories of change in functional ability across diverse populations. To address error bias, state-of-the-art statistical methodologies will be utilized including latent growth curve, measurement models and missing data strategies. Utilization of these methods will provide unbiased estimates of the rates of change (e.g. the pace and velocity) in functional ability over time. The long-term goals of this project will assess how change in age-related functional ability differs across various ethnic groups and social strata. This work will uncover the biobehavioral mediating mechanisms responsible for function decline. The results will ultimately provide a basis for informing intervention efforts aimed at preventing disabilities. While the candidate possesses the appropriate methodological skills necessary to pursue the proposed research agenda, there is a considerable gap in biomedical experience and theoretical knowledge in geriatrics and gerontology. The major career development objectives of this proposal will provide a solid background in aging studies. This will be accomplished two ways; 1) through formal didactic course work in gerontology, and 2) immersion in mentored research projects addressing change in functional ability. The training will provide the candidate with the necessary medical, biological, and sociological training in aging research that will lead to innovative research as an independent researcher in the area of functional ability. The University of Texas Health Science Center San Antonio (UTHSCSA) has developed nationally recognized education and training programs in aging and geriatrics. Here, the training will be obtained through a series of formal gerontology courses, seminars, workshops, and frequent contact with widely experienced mentors where a series of research projects are proposed.